

L09000010501

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(City/State/Zip/Phone #)

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(Business Entity Name)

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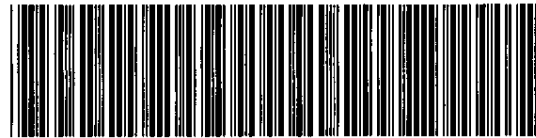
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800138122608

02/03/09--01002--001 **155.00

Effective Date

01/19/09

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JAN 30 PM 2:48

T. HAMPTON

FEB - 2 2009

EXAMINER

6138-600

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Two Lads and a Dad, LLC.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark E. Cook, CPA

(Name of Person)

Mark E. Cook CPA, LLC

(Firm/Company)

12217 Lashbrook Court

(Address)

Jacksonville, FL 32223

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark E. Cook, CPA

(Name of Person)

at (904) 476-4379

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 JAN 26 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 26, 2009

MARK E COOK, CPA, LLC
12217 LASHBROOK CT
JACKSONVILLE, FL 32223

SUBJECT: TWO LADS AND A DAD, LLC
Ref. Number: W09000003819

We have received your document for TWO LADS AND A DAD, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$155.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 909A00002706

Effective Date

01/19/09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Two Lads and a Dad, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

8415 San Martarro Drive West
Jacksonville, FL 32217

Mailing Address:

8415 San Martarro Drive West
Jacksonville, FL 32217

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Mark E. Cook, CPA

Name

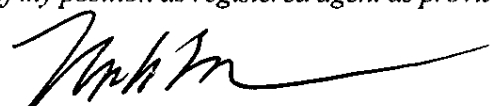
12217 Lashbrook Court

Florida street address (P.O. Box **NOT** acceptable)

Jacksonville, FL 32223

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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DIVISION OF CORPORATIONS
09 JAN 30 PM 2:48

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

James M. Whitfield

8415 San Martarro Drive West

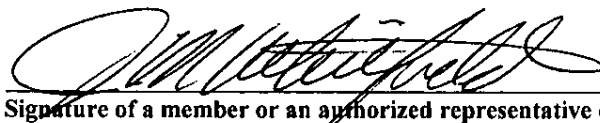
Jacksonville, FL 32217

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 01/19/09. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

James M. Whitfield

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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