

L090000012361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

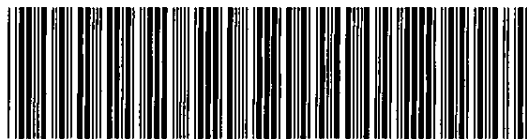
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 FEB - 5 PM 1:35

J. BRYAN

FEB - 6 2009

EXAMINER

MyCorporation  
An Intuit Company

21215 Burbank Blvd. Ste. 400  
Woodland Hills, CA 91367

intuit.

Toll-Free: 888-692-6771 | Direct: 818-436-8225 | FAX: 818-879-8005  
E-mail: info@mycorporation.com

## ROUTINE SERVICE FILING REQUEST

Friday, January 09, 2009

Division of Corporations  
Florida Department of State  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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SECRETARY OF CORPORATIONS  
09 FEB -5 PM 1:35

Re: *ShrinkGeek LLC*

Ladies and Gentlemen:

Please find enclosed for filing Articles of Organization for the above referenced company.

Enclosed is a check in the amount of \$155.00 for filing and for a **certified copy**.

Please return the **certified copy** to the address below.

Thank you for your assistance.

Sincerely,

MyCorporation, an Intuit Company  
**Attn: Fulfillment Dept.**  
21215 Burbank Blvd. Ste. 400  
Woodland Hills, CA 91367

**Articles of Organization  
For  
ShrinkGeek LLC  
Florida Limited Liability Company**

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**ARTICLE I - Name:**

The name of the Limited Liability Company is ShrinkGeek LLC.

**ARTICLE II - Address:**

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

3101 56th Street North  
Saint Petersburg, FL 33710

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Michael McGreevy  
3101 56th Street North  
Saint Petersburg, FL 33710

*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.*



Michael McGreevy, Registered Agent

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Michael McGreevy  
3101 56th Street North  
Saint Petersburg, FL 33710

Melissa Voecks  
3101 56th Street North  
Saint Petersburg, FL 33710

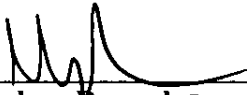
Ralph Brox  
806 East Hamilton Avenue  
Tampa, FL 33604

Scott Damiano  
2941 37th Avenue North  
Saint Petersburg, FL 33713

Robert Loehlin  
6392 Hampton Drive North  
Saint Petersburg, FL 33710

Alexis Kassan  
6392 Hampton Drive North  
Saint Petersburg, FL 33710

Heather Mims  
904 La Marche Drive  
Jacksonville, FL 32205



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**Meghan Record, Organizer**

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