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Special Instructions to I	Filing Officer:	
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01/29/09--01037--002 **130.00

Effective Date

SECRETARY OF STATE DIVISION OF CORPORATIONS

Office Use Only

T. HAMPTON
FEB 2 0 2009
EXAMINER

189-468E

COVER LETTER

	on of Corporations			
SUBJECT:	FOR WARD	THINKING .	INOVATIONS.	LL
		Limited Liability Compa		_
The enclosed A	rticles of Organization and fee(s) are submitted for filing	•	
Please return al	l correspondence concerning th	is matter to the following:	:	
\	JOHN KED	Tok		,
		(Name of Person)		
Fa	RWARD IM	NKING I.	NOVATIONS.	
		(Firm/Company)		
<u>ک</u> _ د	28 E. VEN	ICE HVE.		
1/	28 E. VEN ENICE, FL.	(Address)		
	ENICE, FL.	(City/State and Zip Code	10000000000000000000000000000000000000	
·		(Only Butter and Esp Code	,	
For further info	ormation concerning this matter,	please call:		
JoH	1 RECTOR	941	809- 4355 & Daytime Telephone Number)	•
	(Name of Person)	(Area Code	& Daytime Telephone Number)	
Enclosed is a	check for the following amou	ınt:		•
	ng Fee \$\frac{\sqrt{30.00}}{\sqrt{130.00}}\$ Filing Fe Certificate of State	ee & 🔲 \$155.00 Filing	y Certificate of	Status &
	Mailing Address Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	Registrations Division of Clifton Boundary 2661 Executions	urier Address on Section of Corporations uilding cutive Center Circle ee, FL 32301	



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

09 FEB 19 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 12, 2009

JOHN RECTOR 528 E VENICE AVE VENICE, FL 34285

SUBJECT: FORWARD THINKING INNOVATIONS LLC

Ref. Number: W0900004688

We have received your document for FORWARD THINKING INNOVATIONS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 29, 2009. Please amend your document accordingly.

Please return the corrected original and one copy of your document, along with 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 Registration/Qualification Section

Letter Number: 709A00005123



RECEIVED

09 FEB 11 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

January 30, 2009

JOHN RECTOR 528 E VENICE AVE VENICE, FL 34285

SUBJECT: FORWARD THINKING INOVATIONS LLC

Ref. Number: W09000004688

We have received your document for FORWARD THINKING INOVATIONS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing. INOVATIONS OR INNOVATIONS.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 29, 2009. Please amend your document accordingly.

Please return the corrected original and one copy of your document, along with 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
Registration/Qualification Section

Letter Number: 309A00003448

Effective Date 02 01/09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
	T	
FORWARD HINKING	NNOVATIONS 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 prin	icipal office of the Limited Liability Company i	s:
,	,	
Principal Office Address:	Mailing Address:	
528 F VENICE AVE	Same	
VENICE, FL. 34285		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register		
business entity with an active Florida registration.)	or rigoni. Tournast designate at man rount of another	
The name and the Florida street address of the reg	gistered agent are:	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-	
JOHN RECT	'ok	
Name	1	
SOHN RECT Name 528 E. VENI	CE, HVE	
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)	
City, State, and	FL 34285	
City, State, and	d Zip	
Having been named as registered agent and to ac	cent service of process for the above stated limite	₽d
	is certificate, I hereby accept the appointment as	
registered agent and agree to act in this capacity.		
	formance of my duties, and I am familiar with and	1
accept the obligations of my position as registe	erealagent as provided for in Chapter 608, F.S	
$\langle \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		0
	e (REQUIRED) 29 29	₹
Registered Agent's Signatur	e (REQUIRED)	25
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	9	SECRETARY OF SIA
•	ED)	유 유
· (CONTINU	ED) ==	RA

Page 1 of 2

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGL	JOHN KECTOR 617 APALACHICOLA RO.
•	VENICE, FL. 34285
MCRM	GAYLE RECTOR
	VENICE, FL. 34285
MERM	
(Use attachment if necessary)	
CLEV: Effective date if other than the	e date of filing: $2 - 1 - 09$. (OPTION.
	be specific and cannot be more than five business da

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.)

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)

DIVISION OF CURPURALIUNS