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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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B. KOHR

APR - 8 2009

EXAMINER

## **COVER LETTER**

TO:

**Registration Section** 

| Division of Corporations  |   |                 |
|---|---|-----------------|
| SUBJECT: Swim Video of Tai  | mpa LLC   |                 |
|   | ne of Limited Liability Company)  | <del></del>     |
| The enclosed Articles of Organization and                                       | fee(s) are submitted for filing.  |                 |
| Please return all correspondence concernin                                      | ng this matter to the following:  |                 |
| Timothy J Carroll   |   |                 |
| <u></u>   | (Name of Person)  |                 |
|   |   |                 |
|   | (Firm/Company)  | T 98            |
| 9637 Norchester Circl   | le  | O9 APR          |
|   | (Address)   | F1L             |
| Tampa, Florida 33647  | 7   | FILED           |
| **************************************  | (City/State and Zip Code)   | 8: 1<br>02: 1   |
| For further information concerning this ma                                      | atter, please call:   | )RDA            |
| Timothy J Carroll   | at ( 813 ) 973-4297   |                 |
| (Name of Person)  | (Area Code & Daytime Telephone Numl   | ber)            |
| Enclosed is a check for the following a   | mount:  |                 |
| \$125.00 Filing Fee \$130.00 Filing Certificate of                              | Status Certified Copy Certifica (additional copy is enclosed) Certified       | ite of Status & |
| Mailing Addres Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL | tion Registration Section porations Division of Corporations Clifton Building |                 |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limited Liability  | Company is:  |
|--|--|
| Swim Video of Tampa LL   | C  |
| (Must end with the word  | "Limited Liability Company, "L.L.C.," or "LL.C.")  |
| ARTICLE II - Address:  |  |
| The mailing address and street add   | ress of the principal office of the Limited Liability Company is   |
| Principal Office Address:  | Mailing Address:   |
| 9637 Norchester Circle   | 9637 Norchester Circle   |
|  | COO, Hordingsto, Circle  |
| Tampa, Florida 33647   | Tampa, Florida 33647   |
| Tampa, Florida 33647  ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registra  | Tampa, Florida 33647  7, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another tion.)  |
| Tampa, Florida 33647  ARTICLE III - Registered Agen (The Limited Liability Company cannot serve  | Tampa, Florida 33647  7, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another tion.)  |
| Tampa, Florida 33647  ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registra  | Tampa, Florida 33647  7, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another tion.)  |
| Tampa, Florida 33647  ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registre.) The name and the Florida street ad   | Tampa, Florida 33647  7, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another tion.)  |
| ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registre The name and the Florida street ad  Timothy J (              | Tampa, Florida 33647  7, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another tion.)  |
| ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registr.) The name and the Florida street ad  Timothy J (             | Tampa, Florida 33647  7, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another tion.)  |
| ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registr.  The name and the Florida street ad  Timothy J (  9637 Norcl | Tampa, Florida 33647  7, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another tion.)  Idress of the registered agent are:  Carroll  Name  Dester Circle |

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

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

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

| "MGR" = Manager "MGRM" = Managing Member   |              |
|--|--------------|
|  |              |
| MGR Timothy J Carroll  |              |
| 9637 Norchester Circle   | _            |
| Tampa, Florida 33647   | _            |
|  | _            |
|  | <b>–</b>     |
|  | _            |
|  | <del>-</del> |
|  | _            |
|  | _            |
| (Use attachment if necessary)  |              |
| ARTICLE V: Effective date, if other than the date of filing: (OPTIO  | ONAL)        |
| (If an effective date is listed, the date must be specific and cannot be more than five business to or 90 days after the date of filing.)  | s days prior |
| or you may be accounted and our carriery   |              |
| 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.) |              |
| Timothy T Carroll Typod 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)