# 1000033995

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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APR - <b>8</b> 2009

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EXAMINER



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03/30/09--01002--020 \*\*160.00

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## COVER LETTER \*

TO:	Registration Section Division of Corporations
SUBJE	(Name of Limited Liability Company)
The enc	losed Articles of Organization and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following;
-	haurence Hamilton (Name of Person)
_	Good To Go LLC- (Firm/Company)
_	7650 BENJ' RIGGE TRAIL (Address)
_	Kissimmee FL 34747 (City/State and Zip Code)
For furth	ner information concerning this matter, please call:
how.	(Name of Person) at (407) 452 9123 (Area Code & Daytime Telephone Number)
Enclose	ed is a check for the following amount:
<b>\$125</b> .0	O Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 31, 2009

LAWRENCE HAMILTON 7650 BENJI RIDGE TRAIL KISSIMMEE, FL 34747

SUBJECT: GOOD TO GO LLC. Ref. Number: W09000015029

We have received your document for GOOD TO GO LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is .

Please return 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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 209A00010789

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7650 BENT. RIDGE TRAIL KISSIMMEE, Fl 34747	7650 BENT: R.dee Tenil Kissimmee F 34749
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
LAWSENCE H. H. Name	milton
70 50 BENT: Rich Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Kissininieu- City, State, an	<u>FL 34999</u> d Zip
liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S
	7/ 1/-
Registered Agent's Signatu	MARZO AM 8 AHASSEE FLO
Page 1 of 2	55 ∷

#### 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	INVERTACE HAMILTON
	n n n n n n n n n n n n n n n n n n n
MGR	LAWRENCE HAMILTON 7650 BENJI RIGGE TRAI KISSIMMEE FI 34747
	KISC: MARE F/ 34747
	(117) [ [ [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [
	. 1
m G R M	MARY HAMILTON 7650 BENJI RIDGE TRA. KISSIMMEE 1=1 34747
	7650 BENJI RINGE TRA
	kissimmt = 1=1 34747
The first all the first and th	
(Use attachment if necessary)	
	2//2
LE V: Effective date, if other than the	e date of filing: $3/27/09$ . (OPTION
fective date is listed, the date must b	be specific and cannot be more than five business da
days after the date of filing.)	
REQUIRED SIGNATURE:	
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.)

hawrence Hamilton
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)

PILED

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SECURCIANT OF STATE