

LO9000050668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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09 MAY 26 AM 10:40

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

09 MAY 26 PM 1:15

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR  
MAY 26 2009  
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 015323 86218A

AUTHORIZATION :

*[Handwritten signature]*

COST LIMIT : \$ 025.00

FILED  
09 MAY 26 PM 1:15  
TALLAHASSEE, FLORIDA

ORDER DATE : May 26, 2009

ORDER TIME : 10:25 AM

ORDER NO. : 015323-005

CUSTOMER NO: 86218A

DOMESTIC FILING

NAME: TAKE CHARGER, LLC

EFFECTIVE DATE:

XXX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young - EXT. 2962

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Take Charger, 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:**

3970 NE Breakwater Drive  
Jensen Beach, FL 34957

**Mailing Address:**

3970 NE Breakwater Drive  
Jensen Beach, FL 34957

**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:

Jeanne M. DeSanctis

Name

3970 NE Breakwater Drive

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

Jensen Beach, 34957 FL

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)

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MAY 26 PM 1:15  
TALLAHASSEE, FLORIDA

**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:**

MGR

Jeanne M. DeSanctis

3970 NE Breakwater Drive

Jensen Beach, FL 34957

\_\_\_\_\_

\_\_\_\_\_

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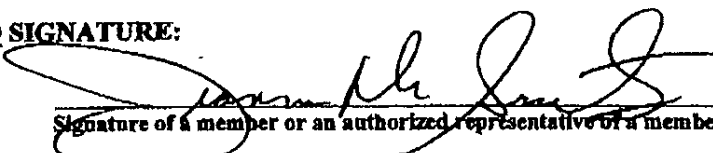
\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

Jeanne M. DeSanctis

Typed or printed name of signor

**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)