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06/05/09--01002--001 **125.00

EFFECTIVE DATE

5/28/09

B. KOHR

JUN - 4 2009

EXAMINER

RECEIVED
09 JUN - 4 PM 3:05
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
09 JUN - 4 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 06/04/09

REF. #: 001133.105411

CORP. NAME: CAPTAIN JOHN BARNES, LLC

EFFECTIVE DATE 5/28/09

FILED
09 JUN -4 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 530517 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

EFFECTIVE DATE 5/28/09

ARTICLES OF ORGANIZATION
OF
CAPTAIN JOHN BARNES, LLC

FILED
09 JUN -4 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of Company shall be: CAPTAIN JOHN BARNES, LLC

ARTICLE II - PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The initial principal office and mailing address of the Company shall be:

221 N Krome Ave
Homestead, FL 33030

ARTICLE III - INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Company's initial registered agent and registered office in the State of Florida shall be:

John Barnes
221 N Krome Ave
Homestead, FL 33030

ARTICLE IV - EXECUTION OF ARTICLES OF ORGANIZATION

The name and post office address of the person duly authorized to execute these Articles of Organization is as follows:

John Barnes

221 N. Krome Ave
Homestead, FL 33030

ARTICLE V - EFFECTIVE DATE

The effective date of these Articles of Organization shall be May 28, 2009.

The undersigned, for the purpose of forming a limited liability company to do business within the State of Florida, does make and file these Articles of Organization, hereby declaring and certifying that he is the authorized representative of the Manager of the Company and certifying that the facts stated above are true.


John Barnes

ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE FORGOING LIMITED LIABILITY COMPANY, AT THE PLACE DESIGNATED IN THESE ARTICLES OF ORGANIZATION THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF HIS DUTIES.

DATED THIS 27TH DAY OF MAY, 2009.

A handwritten signature in cursive script, appearing to read "John Barnes", is written over a horizontal line.

John Barnes