

L09 0000 54685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

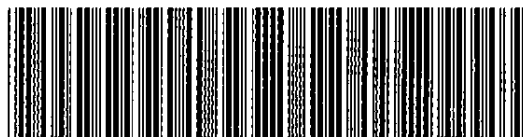
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200156773032

06/04/09--01040--013 **155.00

M. THOMAS

JUN - 5 2009

EXAMINER

L09-54685

PATRICIA A. TERRIS
1415 FIRST STREET NORTH, UNIT 401
JACKSONVILLE BEACH, FL 32250

June 1, 2009

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Personal Time Energy Trading, LLC

Dear Sir or Madam:

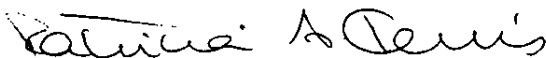
Please find enclosed the Articles of Organization and my check in the amount of \$155.00 for the filing fee and one certified copy of the Articles.

Please send all correspondence to me at 1415 First Street North, Unit 401, Jacksonville Beach, FL 32250. I can be reached by phone at (484)-888-2898.

The enclosed self addressed stamped envelope is for your use in sending me the certified copy.

Thank you for your attention to this matter.

Very truly yours,



Patricia A. Terris
1415 First Street North
Unit 401
Jacksonville Beach, FL 32250
484-888-2898
pterris1@hotmail.com

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Personal Time Energy Trading, 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:

1415 First Street North

Unit 401

Jacksonville Beach, FL 32250

Mailing Address:

1415 First Street North.

Unit 401

Jacksonville Beach, FL 32250

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:

Patricia A. Terris

Name

1415 First Street N., Unit 401

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

Jacksonville Beach, FL 32250

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..

Patricia A. Terris

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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Patricia A. Terris

1415 First Street North, Unit 401

Jacksonville Beach, FL 32250

X

X

X

X

X

X

X

X

X

X

X

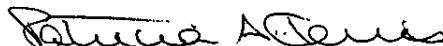
X

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: X. (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.)

Patricia A. Terris

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)