

# LO9000070782

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000168051 3)))



H090001680513ABC/

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : GERALD WEINBERG, P.C.  
Account Number : I20030000043  
Phone : (800) 342-9856  
Fax Number : (800) 354-3381

**FILED**  
09 JUL 22 AM 10:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**SKIPPER SULLY HOLDING, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

**D. BRUCE**  
JUL 23 2009  
**EXAMINER**

**RECEIVED**

09 JUL 22 PM 2:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

(H090001680513)

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SKIPPER SULLY HOLDING, LLC

(Must end with the words "Limited Liability Company," "LLC," or "LLC.")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

353 SOUTH US HIGHWAY 1  
JUPITER, FL 33477

**Mailing Address:**

1108 VAN BUREN PLACE  
BAIDWIN, NY 11510

**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 other business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

DEIDRE SULLIVAN

Name

353 SOUTH US HIGHWAY 1

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

JUPITER FL 33477

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..*

Deidre Sullivan

Registered Agent's Signature (REQUIRED)

(CONTINUED)

(H090001680513)

FILED  
09 JUL 22 AM 10:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Jul. 22. 2009 1:47PM  
(H09000168 0513)

No. 5937 P. 3

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

DEIDRE SULLIVAN

1108 VAN BUREN PLACE

BALDWIN, NY 11510

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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.)

\_\_\_\_\_  
Typed or printed name of signee

**FILED**  
09 JUL 22 AM 10:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Page 2 of 2

(H09000168 0513)