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Certified Copies	_ Certificates	of Status
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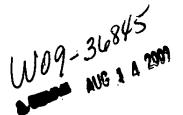
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J. BRYAN

AUG 24 2009

**EXAMINER** 

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ED Banks Ventures LLC	
Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Ed Banks	
ED Banks Ventures LLC ES &	
3844 Hwy 87	
Navarre FL 32566 PA ?	!
EB Ventures 09 @ Yahoo . Com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
EdBacks at (850) le 21 2189  Name of Person Area Code & Daytime Telephone Number	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status}\$  Certificate of Status Certified Copy (additional copy is enclosed)  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

August 14, 2009

ED BANKS ED BANKS VENTURES LLC 38447 HWY 87 NAVARRE, FL 32566

SUBJECT: ED BANKS VENTURES L.L.C.

Ref. Number: W09000036845



We have received your document for ED BANKS VENTURES L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 309A00027726



#### OFFICE OF FINANCIAL REGULATION

FINANCIAL SERVICES
COMMISSION

CHARLIE CRIST GOVERNOR

BILL MCCOLLUM ATTORNEY GENERAL

ALEX SINK
CHIEF FINANCIAL OFFICER

CHARLES BRONSON COMMISSIONER OF AGRICULTURE

August 12, 2009

Mr. Ed Banks 3844 Highway 87 Navarre, FL 32566

LINDA B. CHARITY

**ACTING COMMISSIONER** 

Dear Mr. Banks:

Re: Ed Banks Ventures, LLC

FILED

09 AUG 21 PM 2: 24

SECRETARY OF STATE
SECRETARY OF STATE

Thank you for your recent letter/fax requesting approval for use of the above-referenced name.

It is the opinion of this Office that the above-referenced corporate name is definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Office does not object to your use of the above-referenced name being registered to conduct business in the state of Florida. However, this does not give one the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Linda B. Charity

Director

LBC:bk

cc: Karon Beyer, Chief, Bureau of Commercial Recordings, Division of Corporations, Department of State

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

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Ed Banks Ventur	es L.L.C.
(Must end with the words "Limited Liabili	ty Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3844 Huy 8> War arre FL 33566	Same
MAN BATE FL SOUGE	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the results	egistered agent are:  ABARD  ABARD  ABARD  ABARD  ABARD  ABARD  Box NOT acceptable)

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)

### 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:

	er	Name and Address:	
"MGRM" = Man			
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