6690000099579

| (Requestor's Name) |
|---|
| |
| (Address) |
| (Address) |
| (Address) ` |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status <u>cious inter-</u> |
| Special Instructions to Filing Officer: |

A. LUNT

OCT 15 2009

EXAMINER

Office Use Only



200161419292

10/14/09--01034--016 **125.00

FILED

2009 OCT 14 PM 1: 1

SECRETARY OF STATE
ALL AHASSEF F. STATE

COVER LETTER

| 10; | Division of C | | | | | | | | | | |
|---|---------------------------|---|------------------------|--|---|--------------------------------|------------------|--------------------|-----------------------------------|---------------------|--|
| SUBJE | CT: | Superio | or Loc | ck & S | Safe, L | LC. | | | | | |
| | | Name of Limit | ed Liab | ility Con | npany | | | | | | |
| The end | losed Articles | of Organization and fee(s) are | submitte | ed for fil | ling. | | | | No. | 200 | |
| Please return all correspondence concerning this ma | | | tter to the following: | | | | | 9 OCI | | | |
| | | Isab | Isabel C Mc Farland | | | | | | Z _N Z | Ē | |
| - | | | | of Person | | | | | HO. | 2009 OCT 14 PM 1: 1 | |
| | | Superior Lock & Safe, LLC. | | | | | | 15 P | = | | |
| | | | Firm/Company | | | | | D.F. | 0 | | |
| 10877 Dragonwood Dr | | | | | | | | | | | |
| | | | Add | dress | | | | | | | |
| _ | Tampa, FL 33647 | | | | | | | | | | |
| _ | · · · · · · · · · · · · · | Cit | y/State a | nd Zip C | ode | | | | | | |
| ••• | | imcfarla | | | | | | | · | | |
| For furt | her information | E-mail address: (to be used concerning this matter, please | | annuai r | eport noti | rication | 1) | | | | |
| | Isabe | l Mc Farland | at (| 813 |) | | 388-5 | 090 | | | |
| - | Name | of Person | (| Area Co | ode & Day | ytime 1 | Celephone : | Numbe | r | | |
| Enclose | ed is a check f | or the following amount: | | | | | | | | | |
| /]\$125.0 | 00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | Ce | rtified (| ling Fee Copy copy is end | | Cen Cen | tificate tified | iling For State Copy Copy is en | tus & | |
| | | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Registr Division Clifton 2661 I | /Courier ration Secon of Country on Buildin Executive assee, FL | ction rporati g Cente | ons er Circle | | | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Superior Lock 8 | & Safe, LLC. | | | | | |
|---|---|--|--|--|--|--|
| (Must end with the words "Limited Lia | ability Company," "L.L.C.," or "LLC.") | | | | | |
| ARTICLE II - Address: | | | | | | |
| | principal office of the Limited Liability Company is: | | | | | |
| Principal Office Address: | Mailing Address: | | | | | |
| Superior Lock & Safe, LLC. | Superior Lock & Safe, LLC. | | | | | |
| 10877 Dragonwood Dr | 19046 Bruce B Downs Blvd # 189 | | | | | |
| Tampa, FL 33647 | Tampa, FL 33647 | | | | | |
| | lc Farland | | | | | |
| Nan | ne $\mathbb{Z}_{\omega}^{\mathbb{Z}} \cong \mathbb{D}$ | | | | | |
| 10877 Drag | gonwood Dr | | | | | |
| Florida street address (P. | O. Box NOT acceptable) | | | | | |
| Tampa, | FL 33647 | | | | | |
| City, State | , and Zip | | | | | |
| liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete | to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S | | | | | |

(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:

| "MGRM" = Man | ger Jaging Mambar | |
|---|--|---|
| WIGKIN - Mail | laging Member | |
| | | |
| | | |
| | | |
| ····· | | |
| | | |
| | | N. A. |
| | <u></u> | AR F |
| | | |
| | | |
| | | |
| | | <u> </u> |
| (Use attachment | if necessary) | |
| LE V: Effective of | date, if other than the ted, the date must be te of filing.) | date of filing: (OPTION e specific and cannot be more than five business da |
| LE V: Effective of fective date is list days after the da | date, if other than the ted, the date must be te of filing.) | date of filing: (OPTION e specific and cannot be more than five business date. Machaeland |
| LE V: Effective of fective date is list days after the da | date, if other than the ted, the date must be te of filing.) GNATURE: | e specific and cannot be more than five business da |
| LE V: Effective of fective date is list days after the da | date, if other than the ted, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with secondance with secondary secon | e specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be more than five business da was a specific and cannot be was a specific and |
| LE V: Effective of fective date is list days after the da | date, if other than the ted, the date must be ate of filing.) GNATURE: Signature of a member of this document constitute the facts stated here | e specific and cannot be more than five business day or or an autiforized representative of a member. etion 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury rein are true.) Isabel C Mc Farland |
| LE V: Effective of fective date is list days after the da | date, if other than the ted, the date must be ate of filing.) GNATURE: Signature of a member of this document constitute the facts stated here. | er or an autilorized representative of a member. cition 608.408(3), Florida Statutes, the execution litutes an affirmation under the penalties of perjury rein are true.) |

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

NOTICE Under Fictitious Name Law Pursuant to Section 865.09, Florida Statutes
NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of SUPERIOR LOCK & SAFE, LLC. located at 10877 Dragonwood Dr., in the County of Hillsborough, in the City of Tampa, Florida 33647 Intends to register the said name with the Division of Corporations of the Florida Department of State, Tallahassee, Florida. Dated at Tampa, Fl, this 2 day of October, 2009 Isabel C. McFarland, owner.
TT 279419 10/02/2009

The Tampa Tribune

Published Daily

Tampa, Hillsborough County, Florida

State of Florida }
County of Hillsborough } SS.

Before the undersigned authority personally appeared C. Pugh, who on oath says that she is the Advertising Billing Analyst of The Tampa Tribune, a daily newspaper published at Tampa in Hillsborough County, Florida; that the attached copy of the

Legal Ads

IN THE

Tampa Tribune

In the matter of

Legal Notices

was published in said newspaper in the issues of

10/03/2009

Affiant further says that the said The Tampa Tribune is a newspaper published at Tampa in said Hillsborough County, Florida, and that the said newspaper has heretofore been continuously published in said Hillsborough County, Florida, each day and has been entered as second class mail matter at the post office in Tampa, in said Hillsborough County, Florida for a period of one year next preceding the first publication of the attached copy of advertisement; and affiant further says that she has neither paid nor promised any person, this advertisement for publication in the said newspaper.

| | Care Eu | 20 | |
|-------------------------------------|---------------------------------------|------------------|--|
| Sworn to and subscribed by me, this | ICKE TARY OF STATE LAHASSEE, FLORIDA) | 9 OCT 14 PM 1:10 | |

