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(Business Entity Name)

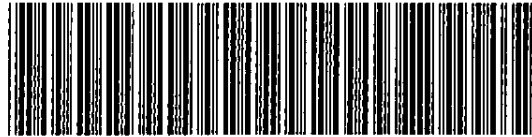
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

NOV 13 2009

EXAMINER

**LIMITED LIABILITY COMPANY
ARTICLES OF ORGANIZATION
FOR LEITCH LEARNING II, LLC**
A Manager-Managed Limited Liability Company

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TALLAHASSEE, FLORIDA

ARTICLE 1: The name of the limited liability company is LEITCH LEARNING II, LLC.

ARTICLE 2: The mailing address and the street address of its registered office in the state of Florida is 667 Autumn Glen Drive, Melbourne, Florida 32940, in the County of Brevard. The name of its registered agent at such address is Alison Jane Leitch.

ARTICLE 3: The Company shall continue in perpetuity unless dissolved by:

- (a) Members whose capital interest exceeds 50 percent vote for dissolution; or
- (b) Any event which makes it unlawful for the business of the Company to be carried on by the Members; or
- (c) The death, resignation, expulsion, bankruptcy, retirement of a Member or the occurrence of any other event that terminates the continued membership of a Member of the Company; or
- (d) Any other event causing a dissolution of a Limited Liability Company under the laws of the State of Florida.

ARTICLE 4: The company shall be managed by a Chief Executive Manager. The name and address of the manager(s) or members are as follows:

Name: ALISON JANE LEITCH, MGRM Address: 667 Autumn Glen Drive, Melbourne, FL 32940

ARTICLE 5: The name and the Florida street address of the Registered Agent are Alison Jane Leitch, 667 Autumn Glen Drive, Melbourne, FL 32940.

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..

Certificate of Acceptance of Appointment of Resident Agent:

I, ALISON JANE LEITCH, hereby accept appointment as Resident Agent for the above named limited liability company.



Signature of Resident Agent

11/4/09

Date

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.)

Alison Jane Leitch

Typed or printed name of signee

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