

L10000001662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

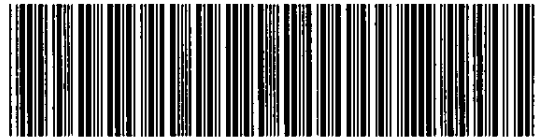
(Document Number)

Certified Copies _____

Certificates of Status _____

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10 JAN -4 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

JAN 5 2010

EXAMINER

December 29th, 2009

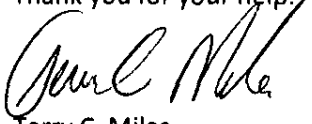
Attn: Leslie Sellers

Dear Leslie,

I spoke with you back in October when I was trying to form this LLC. I used a service on the Internet and you turned down the name at that time, but the service submitted it to the IRS and they issued an EIN #. I have enclosed a copy of the SS-4 form. You told me that I could re-apply after December 25th and that you felt that the 2 years would have passed on the other name that you thought was too close.
(Gunrunners, Inc)

Here is my application and the check. Please contact me if you need any additional information or still have a problem issuing this authorization.

Thank you for your help.



Terry C. Miles
101 Bayshore Drive
Cape Coral, FL 33904
239-980-8615

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Gunrunner, LLC

ARTICLE II - Address:

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

Principal Office Address:

101 Bayshore Drive

Cape Coral Florida, 33904

Mailing Address:

101 Bayshore Drive

Cape Coral Florida, 33904

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Terrance C. Miles

Name

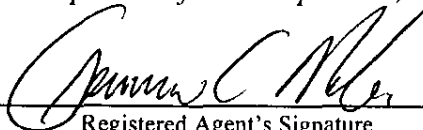
101 Bayshore Drive

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

Cape Coral, FLORIDA 33904

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, Florida Statutes..



Registered Agent's Signature

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

MGRM

Name and Address:

Terrance C. Miles

101 Bayshore Drive

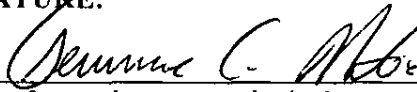
Cape Coral Florida,, 33904

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TALLAHASSEE, FLORIDA

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

Terrance C. Miles

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)