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Special Instructions to Filing Officer:

L. SELLERS

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SEORETARY OF STATE

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COVER LETTER

TO:

Registration Section

	Division of C	orporations	•	
5	SUBJECT:	North I	Florida Tae Kwon Do	
		Name of Limi	ed Liability Company	
1	The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Ī	Please return all corres	pondence concerning this ma	ter to the following:	
		Willian	Charles Cotter Jr.	
			Name of Person	
			Firm/Company	
		:	2511 Golf Dr.	
		·	Address	
,	anne <mark>gerkag</mark> eres.	Pa	latka, FL 32177	
			y/State and Zip Code	
Ly algan Carlot	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E-mail address: (to be used	nftkd@att.net for future annual report notification)	Transfer of all
F	For further information	concerning this matter, pleas	e call:	•
_		ill Cotter	at (386)329-2655	
	Name	e of reison	Area Code & Daytime Telephone Number	
F	Enclosed is a check t	or the following amount:		
V	\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Certificate of Certified Co (additional copy)	of Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
North Florida Tae h	
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1817 Reid St. Suite #100 Palatka, FL 32177	1817 Reid St. Suite #100 Palatka, FL 32177
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registerest business entity with an active Florida registration.) The name and the Florida street address of the interest address of the interest address.	tered Agent. You must designate an individual or another
William Charle	es Cotter Jr.
Name	
2511 Go	olf Dr.
Florida street address (P.O	. Box NOT acceptable)
Palatka, FL 32177	
, a.a.a., , = 0=	FL
City, State, a	nd Zip

(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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	_
"MGRM" = Managing Membe	> F
MGR	William Charles Cotter Jr.
	2511 Golf Dr.
	Palatka, FL 32177
	· · · · · · · · · · · · · · · · · · ·
-,	
	
(Use attachment if necessary)	
(Ose attachment if necessary)	
LEV: Effective date, if other th	han the date of filing: 01/01/2010 . (OPTIONAL
ffective date is listed, the date r	must be specific and cannot be more than five business days
days after the date of filing.)	
PROTUPED GLOVATURE	
REQUIRED SIGNATURE:	ma Out
	Mar () III)
Signature of a	member or an authorized representative of a member.
	,
of this docume	with section 608.408(3), Florida Statutes, the execution ent constitutes an affirmation under the penalties of perjury
that the facts st	tated herein are true.)
	,
<i>.</i>	William Charles Cotter Jr.
	·
Filing Fees:	William Charles Cotter Jr.
	William Charles Cotter Jr.

NA -4 PH 1:

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