

L10000006188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

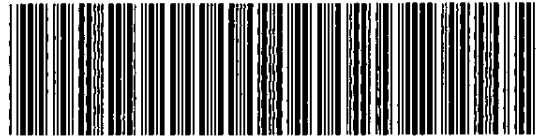
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100165692521

01/15/10--01025--001 \*\*125.00

EFFECTIVE DATE  
1/16/10

FILED  
10 JAN 15 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. O'Connell

JAN 19 2010

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 11-7 Thrift Store Limited Liability Company  
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:

Andrew J. Hecker  
Name of Person

11-7 Thrift Store Limited Liability Company  
Firm/Company

6013 East Colonial Dr.  
Address

Orlando FL 32807  
City/State and Zip Code

AndrewHecker@BellSouth.NET  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vicki Hecker at ( 407 ) 756-5669  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**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:

11-7 Thrift Store Limited Liability Company

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

### ARTICLE II - Address:

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

#### Principal Office Address:

6013 EAST COLONIAL DR.  
ORLANDO FL. 32807

#### Mailing Address:

6013 EAST COLONIAL DR.  
ORLANDO FL. 32807

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Andrew J. Hecker

Name

5760 Michelle Lane

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

SANFORD FL 32771

City, State, and Zip

FILED  
10 JAN 15 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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..*

Andrew J. Hecker  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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

**Name and Address:**

MGRM

Andrew J. Hecker

5760 Michelle Ln

Sanford FL 32771

MGRM

Vicki Hecker

5760 Michelle Ln.

Sanford FL 32771

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 1-16-2010 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

Andrew J. Hecker

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.)

Andrew J. Hecker

Typed or printed name of signee

**Filing Fees:**

**\$125.00 Filing Fee for Articles of Organization and Designation  
of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**

FILED  
10 JAN 15 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA