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D. BRUCE

FEB. 2 2010

**EXAMINER** 

# **COVER LETTER**

TO:	O: Registration Section Division of Corporations		
SUBJ	UBJECT: MR. MAJIC Limited Liability Company	bility Company	
The er	he enclosed Articles of Organization and fee(s) are submitted for filing.	·	
Please	ease return all correspondence concerning this matter to the following:		
	Rodney H Robinson Sv.		
		,	
	Firm/Company		
	1355 HITHWAY 20 E		
	treeport TC 32349  City/State and Zip Code	TAPE OF	
	· · ·	EB -	4/VMF
For fur	E-mail address: (to be used for future annual report notification further information concerning this matter, please call:		m
R	Reduced H. Robinson St. at (850) 8800 Name of Person Area Code & Daytime	-6067 25	
Enclos	aclosed is a check for the following amount:		
<b>]</b> \$125.	125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	)
	Mailing AddressStreet/Courier AddrRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive CenterTallahassee, FL 3230	ons er Circle	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

MR. MATIC LL  (Must end with the words "Limited Lia	ability 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:	Mailing Address:
1355 HIWAY 20 E	Same
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.)  The name and the Florida street address of the Registration.	ACC TO
Florida street address (P.	A ○ E O. Box NOT acceptable)
Treeport City, State	FL 32347

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..

Registered Agent's Signature (REOUIRED)

## Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

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The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Rodney H Robinson St
MCTR	1385 HIGH WAY 30E
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the	date of filing:
REQUIRED SIGNATURE:	or an authorized representative of a member.
(In accordance with sect of this document constitute that the facts stated here	tion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury ein are true.)
Kodnoy Typ	H KUDINSON SUped 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)