

L100000013173

Gwendolyn Turner
(Requestor's Name)

Southland Home & Office Solutions, LLC
(Address)

6864 Galle Court
(Address)

Orlando, FL 32818
(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

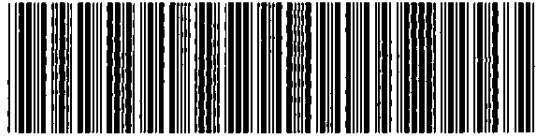
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FEB -4 2010

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FILED
10 FEB -3 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Southland Home & Office Solutions, LLC
(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:

6864 Galle Court
ORLANDO, Florida 32818

Mailing Address:

6864 Galle Court
ORLANDO, Florida 32818

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:

BARBARA BRINSON

Name

3470 West Washington Street

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

ORLANDO, FL 32805

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, F.S..

Barbara Brinson
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

MGR

MGR

Name and Address:

GWENDOLYN TURNER
108104 GAIL COURT
ORLANDO, FLORIDA 32818

SHEDRICK BRADLEY
3470 W. WASHINGTON STREET
ORLANDO, FLORIDA 32805

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Feb. 1, 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:

Gwendolyn Turner

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.)

GWENDOLYN TURNER

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 FEB -3 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Barbara Brinson
Registered Agent's Signature (REQUIRED)

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"MGR" = Manager

"MGRM" = Managing Member

MGR

MGR

Name and Address:

GWENDOLYN TURNER
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ORLANDO, FLORIDA 32818

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