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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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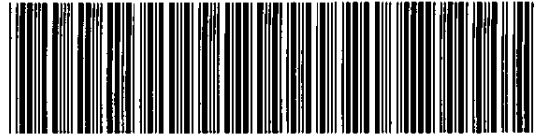
(Business Entity Name)

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DIVISION OF CORPORATIONS
10 FEB 15 AM 8:50

B. KOHR

FEB 16 2010

EXAMINER

ROBERT S. THURLOW, P.A.
ATTORNEY AT LAW
CERTIFIED FAMILY MEDIATOR
415 CANAL STREET
NEW SMYRNA BEACH, FLORIDA 32168

ASSISTANTS:
JANE MYERS: FAMILY & CIVIL
DIANE EYRE: ESTATES & PROPERTY
MARJORIE THURLOW: CLIENT SERVICES
GLENDA SNELL: ACCOUNTING

PHONE:
(386) 424-530
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(386) 424-1456
E-MAIL:
rthurlow@bell

FILED STATE
CLERK OF COURTS
10 FEB 15 AM 8:50

February 10, 2010

FL Secretary of State
Attn: Registration Section
P.O. Box 6327
Tallahassee, FL 32314

RE: QUIMBIES, LLC

Dear Sir/Madam:

Enclosed are the following:

1. Articles of Organization for the above referenced LLC and one copy.
2. Acceptance of Appointment as Registered Agent.
3. \$125.00 filing fee

Please process this new entity and return a time stamped copy for my files.

Thank you for your assistance with this request. Should you have any questions, please do not hesitate to contact me.

Very truly yours,


Robert S. Thurlow

RST:jkm
Enclosure(s)
cf: Client

**ARTICLES OF ORGANIZATION
OF
QUIMBIES, LLC**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 FEB 15 AM 8:50

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, does hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I -- NAME

The name of the limited liability company shall be **QUIMBIES, LLC** ("Company").

ARTICLE II -- ADDRESS

The street address of the principal office of the company shall be **QUIMBIES, LLC** at 404 Louise Avenue, New Smyrna Beach, FL 32168 and the mailing address is the same.

ARTICLE III OWNERS' ASSOCIATION -- DURATION

The company shall commence its existence on the date the articles of organization were filed by the Florida Department of State. The company's existence shall be perpetual.

ARTICLE IV -- REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the State of Florida is **David D. McMains** at 404 Louise Avenue, New Smyrna Beach, FL 32168.

ARTICLE V -- CAPITAL CONTRIBUTIONS

The members of the company shall contribute all of the capital of the company in cash or property.

ARTICLE VI -- ADDITIONAL CAPITAL CONTRIBUTIONS

The members shall make additional capital contributions to the company as the members determine necessary.

ARTICLE VII -- ADMISSION OF NEW MEMBERS

No additional members shall be admitted to the company except with the written consent of the members of the company and on such terms and conditions as shall be determined by the members. A member may transfer its interest in the company as set forth in the regulations of the company, but the transferee shall have no right to participate in the management of the business and affairs of the company or become a member unless the member of the company proposing to dispose of its interest approves of the proposed transfer by written consent.

ARTICLE VIII OWNERS' ASSOCIATION -- TERMINATION OF EXISTENCE

The company shall be dissolved on the death, bankruptcy, or dissolution of the members or on the occurrence of any other event that terminates the continued membership of the members in the company.

ARTICLE IX -- MANAGEMENT

The company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The name and address of the members of the company is.

NAME

Karen R. Groski, Member

ADDRESS

P.O. Box 2182
Apex, NC 27502
Kaygroski@yahoo.com

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization at Apex, North Carolina on this 9 day February, 2010.



NAME OF ORGANIZER:

BY: KAREN R. GROSKI,



Applicant:

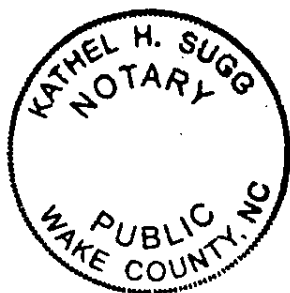
BY: KAREN R. GROSKI

STATE OF NC
COUNTY OF WAKE

Sworn to (or affirmed) and subscribed before me this 9 day
of February, 2010 by Karen R. Groski.

Personally Known _____ or X Produced Identification

Type of Identification NC Driver License

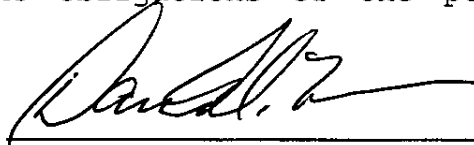


Kathel H. Sugg
Notary Public -- State of NC
Kathel H. Sugg
Print, Type, or Stamp
Commissioned Name of Notary Public

My Commission Expires October 10, 2011

ACCEPTANCE OF REGISTERED AGENT

The undersigned, being the person named in the Articles of Organization of **QUIMBIES, LLC**, as the registered agent of this limited liability company, hereby consents to accept service of process for the above stated company at the place designated in the articles of organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.



Name: **DAVID D. McMAINS**
Registered Agent

Dated: February 8th, 2010