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(Requestor's Name)
(Address)
, ,
<u> </u>
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
:
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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EXAMINER

DIVISION OF CORPORATION

Robert J. Martin 2016 Northwest 35th Street Gainesville, FL 32605 352-222-3799 SmartStone@live.com

February 15, 2010

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sir:

Enclosed please find the Articles of Organization for the formation of Smart Stone, LLC. Should you need any additional information, please do not hesitate to contact me at any of the above listed information.

Thank you for your time.

Sincerely,

Robert J. Martin

Enclosure

10 FEB 18 AM 10: 50

COVER LETTER

Division of C					
SUBJECT:	JECT: SMART STONE, LLC.				
		ed Liability Com			
The enclosed Articles	of Organization and fee(s) are	submitted for fili	ing.		
Please return all corre	spondence concerning this mat	ter to the followi	ng:		
	Ro	obert J. Mart	in		
	•	Name of Ferson			
	SMA	RT STONE, Firm/Company	LLC.		
		r min/Company			
	2016 NW 35th Street				
		Address			
	Gaines	ville, Florida	32605		
	Cit	y/State and Zip Co	ode		
	Sma E-mail address: (to be used	rtstone@live	.com	on)	
For further informatio	n concerning this matter, please		•	,	
	ob Martin	at (352		222-3799	
Nam	ne of Person	Area Co	ide & Daytime	Telephone Number	
Enclosed is a check	for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fill Certified Conditional conditi		\$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	Registi Divisio Cliftor 2661 E	Courier Addration Section on of Corporal Building Executive Cenassee, FL 323	tions ter Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	E, LLC. ty Company," "L.L.C.," or "LLC.") incipal office of the Limited Liability Company is:				
SMART STONE, LLC.					
(Must end with the words "Limited Liabili	ty Company," "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
2016 NW 35th Street Gainesville, Florida 32605	2016 NW 35th Street Gainesville, Florida 32605				
Salijesville, i lotida 32003	Galdesville, Florida 52005				
(The Limited Liability Company cannot serve as its own Registration.) The name and the Florida street address of the respect to the respect	egistered agent are:				
2016 NW 35th Street					
Florida street address (P.O. Box <u>NOT</u> acceptable)					
Gainesville, Florida 326 \mathfrak{A}_{FL}					
City, State, ar	nd Zip				
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	necept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S				

Page 1 of 2 (CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Robert J. Martin 2016 NW 35th Street Gainesville, Florida 32605 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: . (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:** 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.)

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)

Robert J. Martin
Typed or printed name of signee