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**EXAMINER** 



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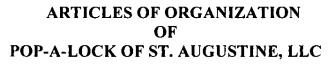
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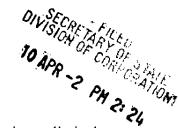
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### **COVER LETTER**

	*,	*	<b>4</b>
TO: Registration Section Division of Corporat			
SUBJECT: POP-A	Name of Limite	St. Augusticed Liability Company	se JLLC.
The enclosed Articles of Organ	ization and fee(s) are s	submitted for filing.	
Please return all correspondence	e concerning this matt	er to the following:	
	tmy Mar	Name of Person	
	St. John	S LOW GROUP Firm/Company	)
	509 Anast	rosia Blvd.	
St.	evo asila	FL 32080  //State and Zip Code  //OUD.COM  or future annual report notification	
For further information concern		0	,
Amy Marie Name of Person	≥ √0	at (904) 495 Area Code & Daytime T	- 0400 elephone Number
Enclosed is a check for the for	ollowing amount:		
	0.00 Filing Fee & tificate 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)
Regi Divi:	ling Address stration Section sion of Corporations	Street/Courier Addre Registration Section Division of Corporation	<del></del> -

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301





These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to the Florida Limited Liability Company Act, Chapter 608, *Florida Statutes*, as the same may from time to time be amended (the "Act").

### ARTICLE I NAME

The name of the limited liability company (the "Company") is: POP-A-LOCK OF ST. AUGUSTINE, LLC.

# ARTICLE II ADDRESSES

The initial mailing address of the Company is 224 Michelangelo Place, St. Augustine, Florida 32084.

### ARTICLE III REGISTERED AGENT

The name and street address of the initial registered agent of the Company is Amy Marie Vo, Esq., St. Johns Law Group, 509 Anastasia Boulevard, St. Augustine, Florida 32080.

## ARTICLE IV MANAGEMENT

The Company is to be managed by the members and is therefore, a member managed company.

#### ARTICLE V LIMITED LIABILITY

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Company, has executed these Articles of Organization this 19 day of March, 2010. 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.

John Kane, Authorized Representative

#### ACCEPTANCE OF REGISTERED AGENT

I, Amy Marie Vo, Esq. of St. Johns Law Group, having been named to accept the service of process for POP-A-LOCK OF ST. AUGUSTINE, LLC, certify that I am a permanent resident of Duval County, Florida, and do hereby accept to act in this capacity, and agree to comply with the laws of the State of Florida relative to keeping open said office.

DATED at St. Johns County, Florida, this 18 day of March, A.D., 2010.

By: Marie Vo, Esq.

STATE OF FLORIDA (COUNTY OF ST. JOHNS (COUNTY OF ST

I HEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared Amy Marie Vo, who is personally known to me and known to be the person/entity described as the authorized agent and resident agent who executed the foregoing Articles of Organization and Acceptance of Registered Agent and acknowledged before me that she executed same.

IN WITNESS WHEREOF, I have hereunder set my hand and affixed my official seal at St. Johns County, Florida, this 18 day of March, A.D., 2010.

Notary/Public, State of Florida

Printed Name:

My Commission expires:

