

L100000040/08

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

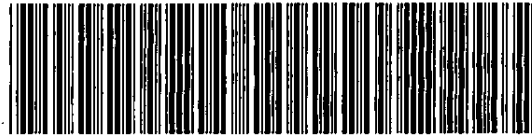
Special Instructions to Filing Officer:

A. LUNT

APR 14 2010

EXAMINER

Office Use Only



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04/12/10--01069--007 **125.00

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2010 APR 12 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Campus Ruckus, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maureen A. Drews

Name of Person

Holland & Knight LLP

Firm/Company

131 South Dearborn Street, 30th Floor

Address

Chicago IL 60603

City/State and Zip Code

CampusRuckus@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maureen A. Drews

Name of Person

at (312) 715-5737

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Campus Ruckus, 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:

Mailing Address:

933 Lancaster Drive
Orlando, FL 32806

933 Lancaster Drive
Orlando, FL 32806

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:

Benjamin Cohen

Name

933 Lancaster Drive

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

Orlando

FL 32806

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.

Benjamin Cohen

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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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

Name and Address:

MGRM

Benjamin Cohen
933 Lancaster Drive
Orlando, FL 32806

MGRM

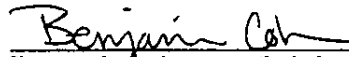
Brett Pollak
1851 Legion Drive
Winter Park, FL 32789

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

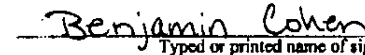
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)



Typed or printed name of signer

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)

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TALLAHASSEE, FLORIDA

FILED

Holland & Knight

131 South Dearborn Street | Chicago, IL 60603 | T 312.263.3600 | F 312.578.6666
Holland & Knight LLP | www.hklaw.com

Maureen A. Drews
Senior Paralegal
312 715 5737
maureen.drews@hklaw.com

April 9, 2010

VIA UPS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee FL 32301

FILED
2010 APR 12 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Campus Ruckus, LLC – Articles of Organization
2010 Illinois Annual Report

Dear Sir or Madam:

Enclosed are the following documents submitted for filing on behalf of Campus Ruckus, LLC:

1. Articles of Organization.
2. Cover Sheet
3. Check for \$125.00 payable to the "Florida Department of State" in payment of the filing fee.

Please return a file-stamped copy of the Articles to my attention. Let me know if you have any questions or comments or need anything else. Thank you.

Please advise us if you have any questions or comments.

Sincerely yours,

HOLLAND & KNIGHT LLP

Maureen A. Drews

Maureen A. Drews

MAD/md
Enclosures

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