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SECRETARY OF SAME

COVER LETTER

TO:	Registration S Division of Co		¹⁹ . W				
	Audiahu						
SUBJECT: Audiobullseye.com 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:							
	Peter Sheard	у					
	Name of Person						
	Audiobullseye	e.com					
	Firm/Company .						
	6611 Columbia Drive						
	Address						
	Bradenton, Fl	·					
			y/State and Zip Code				
petersheardy@yahoo.com E-mail address: (to be used for future annual report notification)							
For fur	ther information	concerning this matter, please	call:				
Peter Sheardy			at (813)465-4739				
	Name	of Person	Area Code & Daytime Telephone Number				
Enclos	sed is a check for	or the following amount:					
□\$ 125.	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$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				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A		
Audiobullseye.com LLC		
(Must end with the words "Limit	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address o	f the principal office of the Limited Liabi	lity Company is:
Principal Office Address:	Mailing Address:	
6611 Columbia Drive	6611 Columbia Drive	
Bradenton, Fl. 34207	Bradenton, Fl. 34207	
ARTICLE III - Registered Agent, Reg	ristered Office, & Registered Agent's Si	ignature:
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	sistered Office, & Registered Agent's Si wn Registered Agent. You must designate an individua	ignature:
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	wn Registered Agent. You must designate an individua	al or another
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	wn Registered Agent. You must designate an individua	al or another OVISION (APR
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	wn Registered Agent. You must designate an individua	SECRETARY 10 APR 16
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	wn Registered Agent. You must designate an individua of the registered agent are: Name	SECRETARY 10 APR 16
The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address Peter Sheardy 6611 Columbia Dri	wn Registered Agent. You must designate an individua of the registered agent are: Name	SECRETARY 10 APR 16
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	wn Registered Agent. You must designate an individua	al or another
The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address Peter Sheardy 6611 Columbia Dri	wn Registered Agent. You must designate an individual of the registered agent are: Name	SECRE JARY
The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address Peter Sheardy 6611 Columbia Dri	wn Registered Agent. You must designate an individual of the registered agent are: Name	al or another OVISION (APR

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..

Registered Agent's Signature (REOURED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managi	Name and Address:			
MGRM	John Hruska 917 Dressler			
	Rochester Hills, MI 48307			
MGRM	Tobias Trimble			
	6611 Columbia Drive Bradenton, FL 34207			
				
(Use attachment if n	ecessary)			
ARTICLE V: Effective date	e, if other than the date of filing:	(OPTIONAL)		
(If an effective date is listed to or 90 days after the date	, the date must be specific and cannot be more than five b	usiness days prior		
to or yo days after the date	or ming.			
<u>REQUIRED</u> SIGN	ATURE:			
	70-			
Si	gnature of a member or an authorized representative of a member.	, •		
را) of	(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.)			
F	Peter Sheardy			
_	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)