Florida Department of State

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Division of Corporations

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: THE LAW OFFICES OF NICK SPRADLIN

Account Number : 120070000020

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ECRETARY OF STATE

FLORIDA LIMITED LIABILITY CO. VIVIEN DONOVAN LLC

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MAY 1 7 2010

Electronic Filing Menu

Corporate Filing Menu

EXAMINER

THE LAW OFFICES OF NICK SPRADLIN, PLLC COUNSELOR & ATTORNEY AT LAW



The Law Offices of Nick Spradlin, PLLC 12000 N. Dale Mabry Highway #110 Tampa, Florida 33648

04/23/2010

To whom it may concern: my client Vivien Donovan who is the sole owner of VIVIEN DONOVAN, INC. states that upon the dissolution of VIVIEN DONOVAN, INC. that she wants the name to be released so that she may use the said company name as VIVIEN DONOVAN, LLC.

said company name as VIVIEN DONOVAN, LLC.

Best Regards,

NICKOLAS J. SPRADLIN'ESQ. 12000 N. DALE MABRY HIGHWAY STE 110 TAMPA, FLORIDA 33618 P# 813-435-3176 F# 813*-333-6358 SECRETARY OF STATE ALLAHASSEE, FLORIDA

H10000 1171 433

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:	
VIVIEN DONOVAN 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 Liability Company is:	
Principal Office Address:	Mailing Address:	
2884 61 LANE NORTH	2884 61 LANE NORTH	
ST. PETERSBURG, FLORIDA 33710	ST. PETERSBURG, FLORIDA 33710	
ARTICLE III - Registered Agent, Reg The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:	
VIVIEN C. DONOV		
	Name SSE	
2884 61 LANE NO	RTH : THE	
ZUOT OT LAITE NO	TO DO DO NOTE OF THE PARTY OF T	
	treet address (P.O. Box NOT acceptable)	
	rreet address (P.O. Box NOT acceptable)	

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 (REQUIRED)

(CONTINUED)

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"MGRM" = Managing Member		
MGRM	VIVIEN C. DONOVAN	
	2884 81 LANE NORTH	> 5 2
	ST. PETERSBURG, FLORIDA 33710	
		HO A
		
·		<u>~</u>
		
		25 E
<u> </u>		
		<u> </u>
		·
(Use attachment if necessary)		
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)	e date of filing: be specific and cannot be more than	(OPTIONA five business day
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:		

(In accordance with section 608.408(3), Florida Statutes, the execution

May 14 2010 4:24PM

NICK SPRADLIN 813336358 of all strains are true.)

VIVIEN C. DONOVAN

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)

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