# 10000661064

| (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: |  |  |  |  |  |
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

THE REPORT OF THE PROPERTY OF

T. HAMPTON

JUN - 8 2010

**EXAMINER** 

# **COVER LETTER**

Registration Section

TO:

| Division of Corporations .   |  |  |  |  |  |
|--|--|--|--|--|--|
| SUBJECT: ACTION MARKETING PARTNERS 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:  |  |  |  |  |  |
| RONALD KANE Name of Person   |  |  |  |  |  |
| Name of Person   |  |  |  |  |  |
| ACTION MARKETING PARTNERS LLC Firm/Company   |  |  |  |  |  |
| Firm/Company   |  |  |  |  |  |
| 2176 N.W. 53RD ST. Address   |  |  |  |  |  |
| Address  |  |  |  |  |  |
| BOCA RATON FL 33496  City/State and Zip Code  RJKANE 0605 e GMAIL. Com  E-mail address: (to be used for future annual report notification)   |  |  |  |  |  |
| City/State and Zip Code  |  |  |  |  |  |
| E-mail address: (to be used for future annual report notification)   |  |  |  |  |  |
| For further information concerning this matter, please call:   |  |  |  |  |  |
| 7  |  |  |  |  |  |
| RONALD KANE at (561) 654-3862  Name of Person Area Code & Daytime Telephone Number   |  |  |  |  |  |
| Name of Person Area Code & Daytime Telephone Number  |  |  |  |  |  |
| Enclosed is a check for the following amount:  |  |  |  |  |  |
| □\$125.00 Filing Fee Certificate of Status □\$155.00 Filing Fee \$ Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, 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

The name of the Limited Liability Company is:

TION MARKETING PARTNERS 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:

| <b>Principal</b> | Office Property of the Contract of the Contrac | Address: |
|------------------|--|----------|
|                  |  |          |
|                  |  |          |
|                  |  |          |

### **Mailing Address:**

## 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:

RONALD KANE
Name

2176 NW 53<sup>RD</sup> ST.

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

BOCA RATON FL 33496

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

# 

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.)

RONALD KANE
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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