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(Business Entity Name)

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JUL 12 2010

EXAMINER



300182312303

07/09/10--01026--013 **160.00

FILED
10 JUL -9 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Registration Section

Division of Corporations

PO Box 6327

Tallahassee, Florida 32314

Re: Articles of Organization for Addictionland LLC.

To Whom It May Concern,

I have enclosed a copy of the Articles of Organization for Addictionland LLC, as well as a check in the amount of \$160 for Filing Fee, Certificate of Status and Certified Copy. Per your instructions, my information is included below:

Cathi Shaw-Marcus

7982 Emerald Winds Circle

Boynton Beach, Florida 33473

954-854-4524 mobile

561-736-7132 home

Please process this document as soon as possible.

Thank you,

A handwritten signature in black ink, appearing to read "Cathi Shaw Marcus", written in a cursive style.

Cathi Shaw-Marcus

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Addictionland, 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:

CATHI SHAW- MARCUS
Name of Person

7982 Emerald Winds Circle
Firm/Company
Address

Boynton Beach, Florida 33473
City/State and Zip Code

CATHI SHAW MARCUS @ GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cathi Shaw-Marcus at (954) 854-4524
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate 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)

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Addictionland 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:

7982 Emerald Winds Circle
Boynton Beach, FL
33473

Mailing Address:

7982 Emerald Winds Circle
Boynton Beach, FL
33473

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:

CATHI SHAW MARCUS
Name

7982 Emerald Winds Circle
Florida street address (P.O. Box **NOT** acceptable)
Boynton Beach, FL 33473
City, State, and Zip

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

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.

Cathi Shaw-Marcus

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

MGR

Name and Address:

Cathi Shaw Marcus
1982 Emerald Woods Circle
Bounton Bch, FL 33473

(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:

Cathi Shaw Marcus

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.)

CATHI SHAW - MARCUS

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)