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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : A.B.S. OF JACKSONVILLE, INC.
Account Number : I20010000215
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**FLORIDA LIMITED LIABILITY CO.
My Family Love Posters, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

T. CLINE

SEP 17 2010

EXAMINER



September 16, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MY FAMILY LOVE POSTERS, LLC
1323 COPPER BLUFF COURT
MACCLENNEY, FL 32063

SUBJECT: MY FAMILY LOVE POSTERS LLC
REF: W10000043502

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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To make the necessary corrections and resubmit your filing, return to our website and access electronic filing, then online filing. Choose to update your request by using the confirmation number and the pin number listed above. For any questions concerning the website, please call 850-245-6939. Please disregard this letter, if you have contacted our office and were advised how to correct your document online.

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Jeraline Saulsberry
Regulatory Specialist II
Registration Section

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANYARTICLE I. NAME:

The name of the Limited Liability Company is: My Family Love Posters, LLC

ARTICLE II. ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is:

1323 Copper Bluff Court
Macclenny, FL 32063

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ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are:

Gale L. Carson
1323 Copper Bluff Court
Macclenny, FL 32063

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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, Florida Statutes.

Gale L. Carson
Gale L. Carson/ Registered Agent

9/14/10
Date

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ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title:
MOR.

Name and Address:
Gale L. Carson
1323 Copper Bluff Court
Macclenny, FL 32063

Title:
MGMR.

Name and Address:
Keturah Alexander
5829 Firestone Road, Apt 328
Jacksonville, FL 32244

Title:
MGMR.

Name and Address:
Donnell D. Bennett
5829 Firestone Road, Apt 328
Jacksonville, FL 32244

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ARTICLE V. EFFECTIVE DATE

The effective date of this document shall be September 13, 2010.

REQUIRED SIGNATURE:

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of Organization, this 14th day of Sept, 2010.

Gale L. Carson
Gale L. Carson, Member

Keturah Alexander
Keturah Alexander, Member

Donnell D. Bennett
Donnell D. Bennett, Member

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)