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10 OCT -4 AM 10: 38

SECRETARY OF STATE

T. HAMPTON

OCT - 5 2010

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: Bus Loop, LLC		
Name of Limit	ed Liability Company	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
•	- · · · · · · · · · · · · · · · · · · ·	
Christopher E. Ells, Esq.		
	Name of Person	
Christophor E. Ella Egg		
Christopher E. Ells, Esq.	Firm/Company	
600 S. Andrews Ave., #405		
	Address	
		
Fort Lauderdale, FL 33301	y/State and Zip Code	
	y/state and Zip Code	
johnjhaley@comcast.net E-mail address: (to be used to	for future annual report notification)	
·	The state of the s	
For further information concerning this matter, please	e call:	
Chris Ells	at (954) 525-1700	
Name of Person	at (954) 525-1700 Area Code & Daytime Telephone Number	
	, and a second s	
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee &	■\$155.00 Filing Fee & ■ \$160.00 Filing Fee,	
Certificate of Status	Certified Copy Certificate of Status &	
	(additional copy is enclosed) Certified Copy	
	(additional copy is enclosed)	
Baratta e A Adama	Character and Administration	
<u>Mailing Address</u> Registration Section	Street/Courier Address Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
A TOTAL CONTROL OF THE STATE OF	-co. mineral American American	

Tallahassee, FL 32301

John Haley 1680 S.E. 4th Street Deerfield Beach, FL 33441

September 22, 2010

SECRETARY OF STATE
BIVISION OF CORPORATIONS
10 OCT -4 AM 10: 38

Re: Organization of Limited Liability Company, "Bus Loop, LLC"

To whom it may Concern:

Please be advised that I, John Haley, owner of the Trade Name, "Bus Loop", is the one and the same person who desires to organize the Limited Liability Company, Bus Loop, LLC.

Please see the attached Articles of Organization for the creation of this new Limited Liability Company. Thank you.

Very truly yours, John Haley		
STATE OF FLORIDA)	
COUNTY OF BROWARD, SS.)	
The foregoing instrument	was acknowledged befor	e me this 27^{tn} day of
September, 2010, by John	Haley, whois pers	onally known by me or
who has produced	NIA	_ as identification;
JASMIN L. SCAGGS Notary Public - State of Florida My Comm. Expires Jun 17, 2014 Commission - EE 2138 N T T T T T T T T T T T T T T T T T T		
My commission Expires:	Time 1070/11	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Bus Loop, LLC	
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1680 S.E. 4th Street, Deerfield Beach, FL 33441	same
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
John Haley	
Name	
1680 S.E. 4th Street	
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
Deerfield Beach	FL 33441
City, State	e, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete perj	NUED)
Page 1 o	T T T T T T T T T T T T T T T T T T T

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

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

Title:		Name and Address:	
"MGR" = N	•		
"MGRM" =	Managing Member		
MGRM		John Haley	
		1680 S.E. 4th Street	
		Deerfield Beach, FL 33441	
			
			
			-
_			
			
(Use attachr	ment if necessary)		
TICLE V: Effect	ctive date, if other than the d	late of filing: (OP	TIONAL)
		specific and cannot be more than five busin	ess days prio
or 90 days after t	the date of filing.)		
DEUIIDE.	<u>D</u> SIGNATURE:		
KEOUIKE	D SIGNATURE.	1 / 1/2	
	<i>,</i>		
	(M / 9/24/20	
	Signature of a member	or an authorized representative of a member.	
	- 11	or an authorized representative of a member.	
	- 11	17	
	- 11	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution under the penalties of perjury in are true.)	
	- 11	17	91VIE

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)