

L10000108289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 OCT 15 AM 10:10

T. HAMPTON  
OCT 18 2010  
EXAMINER

LAW OFFICES OF MICHAEL MORAN

2197 RINGLING BLVD.

SARASOTA, FLORIDA 34237

MICHAEL MORAN

ADAM BRAGG

RYAN VIOLETTE

941-366-1800 (TELEPHONE)

941-954-7101 (FACSIMILE)

October 8, 2010

Florida Dept. of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: Squirrel Posse, LLC**

Dear Sir/Madam:

Enclosed please find an original and one copy of the Articles of Organization for the above-referenced limited liability company. Also enclosed is our firm check in the amount of \$155.00 which represents the following fees:

Filing Fee	\$100.00
Certified Copy Fee	\$ 30.00
Registered Agent Fee	<u>\$ 25.00</u>
TOTAL	\$155.00

Please file the original Articles of Organization and return a certified copy to our office at the above address.

If you have any questions, please do not hesitate to contact me. Thank you for your assistance in this matter.

Very truly yours,



Michael Moran

Enclosures

MM/va

**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY**

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**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**SQUIRREL POSSE, LLC**

**ARTICLE II - Address:**

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

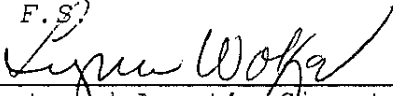
**612 50<sup>th</sup> Street East  
Bradenton, FL 34208**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

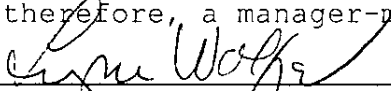
**Lynn Wolford  
612 50<sup>th</sup> Street East  
Bradenton, FL 34208**

*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

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

  
\_\_\_\_\_  
Signature of a member or an  
authorized representative of  
a member

In accordance with §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.

**LYNN WOLFORD**  
(Printed name of signee)