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| PICK-UP | WAIT | MAIL |
| (Bus | iness Entity Nan | ne) |
| (Doc | ument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to F | iling Officer: | |
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EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: HOWARD ADVERTISING, LLC. Name of Limited Liability Company |
| 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: |
| ADRINA D. HOWARD Name of Person |
| HOWARD ADVERTISING, LLC, |
| 3956 Town Center Blud #478 |
| Ollardo, FL 32837 City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Name of Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\$\$} |
| Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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: HOWARD ADVERTISING L. L. C. (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: 3956 Town Contabled 3956 Town Contabled Sento #478 — Onlando, FL'32837 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: |
| ADRINA D. HOWARD |
| 3956 Town Center B/Vd # 478 Florida street address (P.O. Box NOT acceptable) |
| Ollando FL 32837 City, State, and Zip |
| Having been named as registered agent and to accept service of process for the above stated limited |

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..

Howard

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: | Name and Address: |
|--|--|
| . "MGR" = Manager "MGRM" = Managing Member | • |
| M CaR | ADRINA D HOWARD 3956 Town center Blud Story |
| | |
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| | |
| (Use attachment if necessary) | |
| ARTICLE V: Effective date, if other than the | date of filing: (OPTIONAL) e specific and cannot be more than five business days prior |
| to or 90 days after the date of filing.) | |
| | |

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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)