

L10 000114435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

NOV - 3 2010

EXAMINER



100187213071

11/02/10--01017--005 **375.00

FILED
10 NOV - 2 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

FOR

CIRCUMPUNCT, LLC.

THE UNDERSIGNED, for the purpose of forming a Limited Liability Company under the provisions of Chapter 608 of the Florida Statutes, does hereby adopt the following Articles of Organization:

ARTICLE I

Name

The name of the Limited Liability Company is CIRCUMPUNCT, LLC.

ARTICLE II

Address

The address of the principal office of the Limited Liability Company is 224 River Village Drive, DeBary, Florida 32713.

ARTICLE III

Purpose

The Limited Liability Company may transact any and all business for which Limited Liability Companies may be lawfully organized under the Laws of the State of Florida.

ARTICLE IV

Registered Agent

The name and Florida street address of the registered agent is TARA WILSON, 224 River Village Drive, DeBary, Florida 32713.

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 that 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.


Tara Wilson, Registered Agent

FILED
10 NOV - 2 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V

Managing Member

The name and address of the Managing Member is as follows:

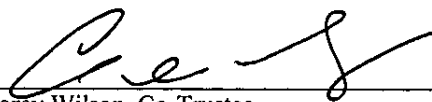
Title

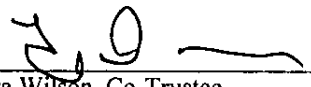
Name and Address

MGRM

COREY WILSON AND TARA WILSON
REVOCABLE INTERVIVOS TRUST
224 River Village Drive
DeBary, Florida 32713

DATED: 10/27, 2010.

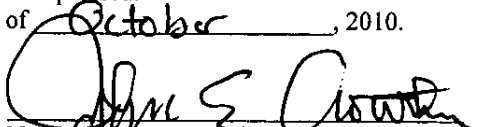

Corey Wilson, Co-Trustee
Managing Member


Tara Wilson, Co-Trustee
Managing Member

STATE OF FLORIDA
COUNTY OF VOLUSIA

BEFORE ME, the undersigned authority, an officer duly authorized in the State and County aforesaid to administer oaths and take acknowledgments, personally appeared COREY WILSON and TARA WILSON, as Co-Trustees of the COREY WILSON AND TARA WILSON REVOCABLE INTERVIVOS TRUST, who is personally known to me or who produced Personally Known as identification, and he acknowledged that he executed the same for the purposes herein expressed.

WITNESS my hand and official seal this 07 day of October, 2010.


Notary Public, State of FL

My commission expires:



JOHN E. CROWTHER
MY COMMISSION # DD 990144
EXPIRES: September 10, 2014
Bonded Thru Budget Notary Services