

L10000123192

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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H100002573173ABC

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To:

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

From:

Account Name : FASTKIT CORP
Account Number : T20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Think Blue Store, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

RECEIVED

10 NOV 30 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

J. SAULSBERRY
EXAMINER
Help DEC 1 2010

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

Think Blue Store, LLC

ARTICLE II – Address:

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

Principal Office Address:

1078 Blue Hill Creek Dr
Marco Island, FL 34145

Mailing Address:

PO Box 609
Marco Island, FL 34146

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Peter McFarland
1078 Blue Hill Creek Dr
Marco Island, FL 34145

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



Registered Agent's Signature

(CONTINUED)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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

MGR

Peter McFarland
1078 Blue Hill Creek Drive
Marco Island, FL 34145

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

Peter McFarland

Typed or printed name of signee

CLERK OF STATE
TALLAHASSEE, FLORIDA

2010 NOV 30 AM 8:52

FILED

To: Page 1 of 4

2010-11-29 10:02:57 PST

13233899998 E. Shella Ding

Division of Corporations

L 10000123201

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Cairns Family LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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J. SAULS
EXAMINER

DEC 1 2010

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2010-11-29 18:02:57 PST

13233890658 From: Sheila Dang

H10000256541 3.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cairns Family LLC
(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:

Sheila Dang

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

100 W. Broadway, Suite 100

(Address)

Glendale, CA 91210

(City/State and Zip Code)

For further information concerning this matter, please call:

Ryan Moran

(Name of Person)

at 323 982-8600 ext. 529

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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2010-11-29 18:02:57 PST

13233890658 From: Sheila Dang

H10000256541 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Caims Family LLC

(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:74 Hilda Rd., Baulkham Hills,
New South Wales, Australia
2153**Mailing Address:**74 Hilda Rd., Baulkham Hills,
New South Wales, Australia
2153**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:

United States Corporation Agents, Inc.

Name

13302 Winding Oaks Blvd., Suite AFlorida street address (P.O. Box NOT acceptable)Tampa

FL

33612-3425

City, State, and Zip

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 Sheila Dang, United States Corporation Agents, Inc.

(CONTINUED)

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To: Page 4 of 4

2010-11-29 18:02:57 PST

13233890658 From: Sheila Dang

H10000258541 3

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRMAdam James Cairns74 Hilda Rd., Baukham Hills New South Wales,
Australia 2153MGRMLianne Gaye Cairns74 Hilda Rd., Baukham Hills New South Wales,
Australia 2153

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be 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.)

Sheila Dang, Legalzoom.com, Inc.

Typed or printed name of signer

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)

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2010 NOV 30 AM 8:52
TALLAHASSEE, FLORIDA

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