

L10000128580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

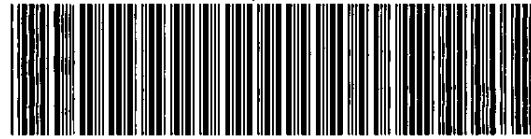
(Business Entity Name)

(Document Number)

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Effective Date 01-01-11

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FILED
10 DEC 15 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

DEC 15 2010

EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **East West Timing 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:

Donnie Palmer

Name of Person

Firm/Company

4340 Tolkien Street

Address

Orlando, FL 32828

City/State and Zip Code

donnie@palmercity.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ada Hernandez

Name of Person

at (**407**)

304-7692

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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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

EAST WEST TIMING LLC.

ARTICLE II - ADDRESS:

THE MAILING ADDRESS AND STREET ADDRESS OF THE PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

PRINCIPAL OFFICE ADDRESS:

**4340 TOLKIEN STREET
ORLANDO, FL 32828**

MAILING ADDRESS:

**4340 TOLKIEN STREET
ORLANDO, FL 32828**

Effective Date 01/01/11

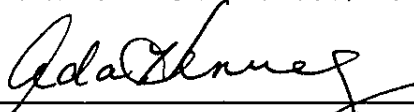
ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

(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:

**ADA HERNANDEZ
925 LEXINGTON PARKWAY UNIT #16
APOPKA, FL 32712**

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 (REQUIRED)

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ARTICLE IV- LIMITED LIABILITY PURPOSE:

EAST-WEST TIMING IS A MULTI-STATE LICENSED LLC PROVIDING STATE-OF-THE-ART COMPUTERIZED SCORING AND TIMING SERVICES FOR INTERNATIONAL, COLLEGIATE, HIGH SCHOOL, AND AGE-GROUP ATHLETIC COMPETITION.

- MANAGEMENT OF SMALL-TO-LARGE SCALE TRACK & FIELD/CROSS-COUNTRY MEETS
- EVALUATION, CONSULTATION, AND ADVISEMENT
- PRESS AND PR REPRESENTATION
- REAL-TIME RESULTS PUBLISHED ON WEB AND BROADCAST VIA SOCIAL NETWORKING (I.E. TWITTER, FACE BOOK)
- LIVE STREAMING OF EVENT AND VIEWER REACTION
- PROFESSIONAL PHOTOGRAPHY
- PHOTO-FINISH PRINTING
- T-SHIRT SALES
- RADIO LYNX
- FIELD LYNX
- FINISH LYNX
- HIGH-TEC MEET MANAGEMENT SOFTWARE
- CHIP TIMING & TRACKING SYSTEMS

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ARTICLE V-

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

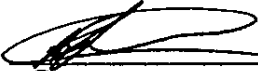
MGR	DAVE PALMER 1820 NORTHWICK PLACE LITHONIA, GA 30058
MGRM	DONNIE PALMER 4340 TOLKIEN STREET ORLANDO, FL 32828
MGRM	KENNETH BROWN 7717 S. VICTORIA AVE. INGLEWOOD, CA 90305

ARTICLE V: EFFECTIVE DATE, IF OTHER THAN THE DATE OF FILING:

JANUARY 1, 2011.

(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. 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.)

DONNIE PALMER

TYPED OR PRINTED NAME OF SIGNEE

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TALLAHASSEE, FLORIDA