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(Requestor's Name)				
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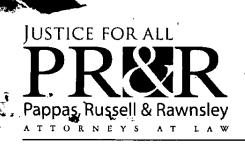


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C. LEWIS MAY - 9 2011 EXAMINER



George S. Pappas David B. Russell Marla J. Rawnsley

May 4, 2011

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re:

Front Porch Pickings, LLC

Our File: 11-055

Dear Sir/Madame:

Enclosed are Articles of Organization for the above limited liability company. Please return the Certificate of Status to David B. Russell, Esquire, 213 Silver Beach Avenue, Daytona Beach, Florida 32118. The email address for future notifications is fp@frontporchpickings.com. For further information on this filing, please contact my legal assistant, Jan Rinaldi, at (386) 254-2941. We have also enclosed our check in the amount of \$130.00 to cover the cost of filing and the certificate.

Your assistance is greatly appreciated.

Sincerely,

David B. Russell

DBR:jr Enclosures

cc: Mr. Jan Pittard

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	<b>FICL</b>	EI	- N:	ame

The name of the Limited Liability Company is:

# FRONT PORCH PICKINGS, 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:	Mailing Address:
344 Tymber Run	344 Tymber Run
Ormond Beach, FL 32174	Ormond Beach, FL 32174

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:

Name
lun
eet address (P.O. Box NOT acceptable)
<sub>FL</sub> 32174
ity, 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 (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED

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

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

2011 BAY - 6 PH 2 8

Title:	Name and Address:	SECRETARY O TALLAHASSEE:
"MGR" = Manager "MGRM" = Managing Member		TALLAHASSEE:
MGRM	Jan Pittard	
	344 Tymber Run	
	Ormond Beach, FL 32174	
MGRM	Nicole Lebron	
<del></del>	612 15th Avenue S	
	Jacksonville Beach, FL 32250	
		<del></del>
		<u> </u>
		<del></del>
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the control of the date is listed, the date must to or 90 days after the date of filing.)	he date of filing:	(OPTIONAL) ive business days prior
<u>REQUIRED</u> S <del>IGN</del> ATURE:		
MEYOTKED GOTTORE.	/)//	

(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.)

Signature of a member or an authorized representative of a member.

Jan Pittard

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)

Page 2 o