

L11000058633

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAY 17 PM 1:05

N. Culigan MAY 18 2011

# MOOVE OUT LLC

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3101 N. Nebraska Ave.  
Tampa, Florida 33603  
Phone (866)493-3279  
Fax (866)874-5319  
MooveOut@gmail.com

May 10, 2011

FL Department of State  
Division of Corporations  
Corporate Filings  
PO Box 6327  
Tallahassee, FL 32314  
(850)245-6050

To whom it may Concern,

This letter is in regards to the Florida Corporation Moove Out LLC, document number L09000115955.

This corporation was administratively dissolved on 09/24/2010 for not filing an annual report.

We do not wish to reinstate this dissolved Corporation and respectfully request that your office release the corporate name for re-use by another entity.

Please do not hesitate to contact me with any questions or concerns. Thank you.

Sincerely,



Heidi Behrendt  
MGRM

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MOOVE OUT 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:

HEIDI BEHRENDT

Name of Person

MOOVE OUT LLC

Firm/Company

3101 N. NEBRASKA AVE.

Address

TAMPA, FL 33603

City/State and Zip Code

HEIDI@MOOVEOUT.COM

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

For further information concerning this matter, please call:

HEIDI BEHRENDT

Name of Person

at ( 866 ) 493-3279

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

MOOVE OUT 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:

3101 N. Nebraska Ave.  
Tampa, FL 33603

#### Mailing Address:

3101 N. Nebraska Ave.  
Tampa, FL 33603

### 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:

HEIDI BEHRENDT

Name

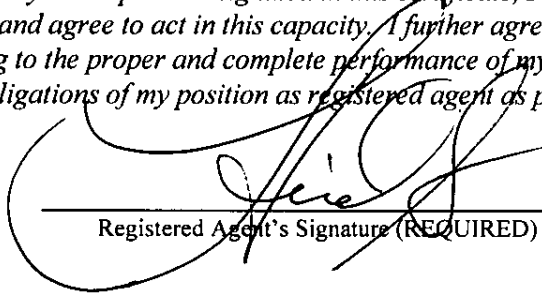
3101 N. NEBRASKA AVE.

Florida street address (P.O. Box **NOT** acceptable)

TAMPA, FL 33603

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 (REQUIRED)

(CONTINUED)

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DIVISION OF CORPORATIONS  
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**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:**

\* PLEASE SEE  
ATTACHMENT

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(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. 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.)

HEIDI BEHRENDT  
\_\_\_\_\_  
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)**

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DIVISION OF CORPORATIONS

#### ARTICLE IV ATTACHMENT

- |         |                   |  |
|---------|-------------------|--|
| 1. MGRM | Heidi Behrendt    | 3101 N. Nebraska Ave. Tampa, FL 33603      |
| 2. MGRM | William Crescenzo | 3101 N. Nebraska Ave. Tampa, FL 33603      |
| 3. MGRM | Nicolo Tarantini  | 2194 Country Golf Dr. Wellington, FL 33414 |
| 4. MGRM | Dylan Arnold      | 3101 N. Nebraska Ave. Tampa, FL 33603      |
| 5. MGRM | Richard Federico  | 1190 Bridgeway Ct. Clermont, FL 34711      |