

L11000063331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

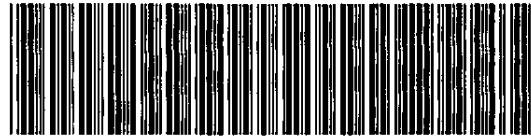
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400207987204

05/27/11--01019--002 **155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 27 PM 10 51

FILED

C. LEWIS

MAY 31 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SOCIAL APPLICANT, 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:

KENNETH M. BLAIR

Name of Person

Firm/Company

16001 NORTH FLORIDA AVENUE

Address

LUTZ, FLORIDA 33549-6128

City/State and Zip Code

kblairtaxofc@aol.com

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

For further information concerning this matter, please call:

KENNETH M. BLAIR

Name of Person

at (**813**) **739-6924**

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 OF
SOCIAL APPLICANT, LLC**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida sets forth the following:

ARTICLE I: NAME

The Name of the Limited Liability Company is: Social Applicant, LLC

ARTICLE II: ADDRESS

The Mailing Address of the Principal Office is: 16001 North Florida Avenue
Lutz, Florida 33549

The Street Address of the Principal Office is: 4010 Water Park Court
Riverview, Florida 33578

ARTICLE III: DURATION

The duration of the Limited Liability Company shall be perpetual.

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager managed company. The name and address of the initial Manager is as follows:

<u>Title</u>	<u>Name and Address</u>
Manager (MGR)	Alexandre Silvestre 4010 Water Park Court Riverview, Florida 33578

ARTICLE V: ADMISSION OF ADDITIONAL MEMBERS

Members may admit additional members at any time pursuant to a majority vote of the Members. The additional Members must agree to be bound by the Operating Agreement.

ARTICLE VI: MEMBERS RIGHTS TO CONTINUE BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy, dissolution of a member or upon the occurrence of any other event which terminates the membership of a member in the limited liability company, the business of the limited liability company shall not be continued and the limited liability company shall be dissolved unless there is obtained the consent of the remaining members of the limited liability company.

FILED
2011 MAY 27 PM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII: REGISTERED AGENT

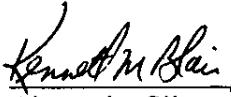
The name and address of the initial Registered Agent in Florida for the Limited Liability Company is: Kenneth M. Blair
16001 North Florida Avenue
Lutz, Florida 33549-6128

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 obligation of my position as Registered Agent.


Kenneth M. Blair, Registered Agent

MAY 25, 2011
Date

Executed at Lutz, Florida on the 25TH day of MAY 2011.

 AUTHORIZED AGENT
Alexandre Silvestre, Manager

(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.)

2011 MAY 27 PM 10 31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED