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DEFAGINGE OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

RECEIVED



J. BRYAN

JUN 29 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Anihinga Marketing & Administrative Services 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:
Anne W. Ahnendt
Name of Person
Firm/Company
44 River Court
Address
Crawfordville, FL 32327-1500 FG 3 10
Anihinan marketina @ omail.com
Anihing A marketing @ Qmail. com E-mail address: (to be used for fullere annual report notification)
For further information concerning this matter, please call:
Anne W. Ahrendt at (850) 528, 0895 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$ \$155.00 Filing Fee & \text{Certified Copy} & \text
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Principal Office Address:	Mailing Address:
The mailing address and street address	ss of the principal office of the Limited Liability Company
ARTICLE II - Address:	
Anthinga Market Must end with the words "I	ing & Administrative Services, LLC
·	
The name of the Limited Liability Co	ompany is:

is:

	- · · · · · · · · · · · · · · · · · · ·
44 River Count Crawfordude, FL 32327	Crawfordville, FL 323 27

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:

Anne W. Ahvendt

Name

Hurer Court

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

Crawfordulle FL 32327-1500

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)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Anne W. Ahvendt 44 River Court Crawfordville, FL 32327-1500
	Por _
	CHE ARY
(Use attachment if necessary)	- STATE OF S
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must b to or 90 days after the date of filing.)	e date of filing: (OPTIONAL) se specific and cannot be more than five business days prior
DECHIDED SICNATUDE.	

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.)

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)