

L11000088458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

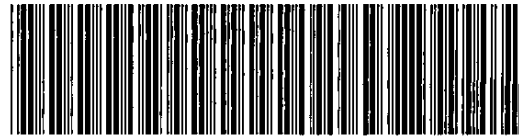
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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08/01/11--01044--006 \*\*155.00

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11 AUG - 1 AM 2011

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

AUG 02 2011

EXAMINER

Carol Allison Document Service  
2650 Baywood Drive  
Titusville, Florida 32780

July 26, 2011

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE; JERRICA BADGETT, LLC.

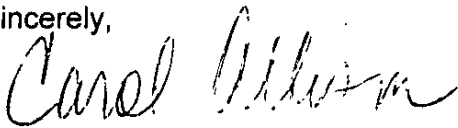
Enclosed please find one original and one copy of Articles of Organization for the above LLC. Enclosed check for \$155.00 for the following fees.

Filing Fee	\$125.00
Certified Copy	\$30.00

Please return all correspondence concerning this matter to the following:

Carol Allison Document Service  
2650 Baywood Drive  
Titusville, Florida 32780  
321.480.9789

Sincerely,



Carol Allison

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY**

**ARTICLE I**

JERRICA BADGETT, LLC.

**ARTICLE II**

Mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

7215 Briggs Ave.  
Cocoa, Fl. 32927

**Mailing Address:**

7215 Briggs Ave.  
Cocoa, Fl. 32927

**ARTICLE III**

Registered Agent, Registered Office, & Registered Agent's Signature:

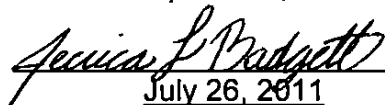
*(You must designate an individual or another business with an active Florida registration)*

The name and the Florida street address of the registered agent is:

Jerrica L. Badgett  
7215 Briggs Ave.  
Cocoa, Fl. 32927

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*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 heareby 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.*

  
July 26, 2011

**ARTICLE IV**

Manager 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

MGRM

Jerrica L. Badgett  
7215 Briggs Ave.  
Cocoa, FL 32927

**ARTICLE V (Optional)**

Effective date, if other than the date of filing: \_\_\_\_\_

*(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:

  
07/26/2011 Jerrica L. Badgett

*(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.)*

**FILED**  
**11 AUG -1 AM 01 54**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**