

L 11 000 103 306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

(Business Entity Name)

(Document Number)

Certified Copies

Certificates of Status

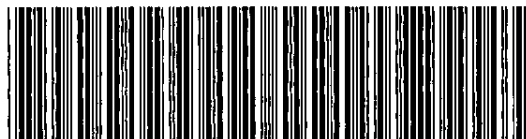
Special Instructions to Filing Officer:

Office Use Only

B. KOHR

SEP - 9 2011

EXAMINER



800211934068

09/09/11--01011--023 \*\*250.00

RECEIVED

11 SEP - 9 PM 12:05

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

11 SEP - 9 PM 2:03

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FLORIDA QUILTER, LLC

Signature \_\_\_\_\_

Requested by: SETH

09/09/11 11:00

Name

Date

Time

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 SEP -9 PM 2:03

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ ✓ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 SEP -9 PM 2:03

**ARTICLES OF ORGANIZATION  
OF  
FLORIDA QUILTER, LLC**

The undersigned hereby certifies that the Members named herein have associated together for the purpose of becoming a Limited Liability Company under Florida Statutes Chapters 608, providing for the formation, rights, privileges, and immunities of limited liability companies for profit and the following Articles of Organization are hereby adopted.

**ARTICLE I.  
NAME**

The name of the Limited Liability Company shall be FLORIDA QUILTER, LLC.

**ARTICLE II.  
DURATION; EFFECTIVE DATE**

This Limited Liability Company shall exist perpetually, commencing as of the date on which these Articles of Organization are filed with the State of Florida Department of State.

**ARTICLE III.  
ADDRESS; PRINCIPAL OFFICE**

The mailing address of the Limited Liability Company and the street address of the principal office is 4505 SE County Road 760, Arcadia, FL 34266.

**ARTICLE IV.  
INITIAL REGISTERED OFFICE AND REGISTERED AGENT**

The address of the initial registered office of the Limited Liability Company is 4505 SE County Road 760, Arcadia, FL 34266, and the name of its initial registered agent at such address is Emily Lynn Cartwright.

## **ARTICLE V. PURPOSE**

The principal purpose for which this Limited Liability Company is organized is to invest, rent, purchase, sell, assign and/or transfer real estate, publicly traded securities, private equities, and all other investments not specifically disallowed by this Agreement. The Company may also engage in any other lawful business or activity incidental to its primary purpose or as approved by the members; however, the Company may not engage in any unrelated trade or business (as defined in Section 513 of the Internal Revenue Code of 1986, as amended) in which it regularly carries on in the ordinary course of business that might generate unrelated business taxable income, as defined by the applicable provisions of Section 512 of the Internal Revenue Code of 1986, as amended. Notwithstanding any other provision in this Agreement, the manager and members shall not have the power to engage in a "prohibited transaction" as defined by the applicable provisions of Section 4975 of the Internal Revenue Code of 1986, as amended, and, furthermore, said managers and members shall not have the power to engage in a transaction involving "life insurance contracts" and "collectibles" as defined by the applicable provisions of Section 408 of the Internal Revenue Code of 1986, as amended.

## **ARTICLE VI. MANAGEMENT**

The Limited Liability Company shall be managed in accordance with the Operating Agreement of the Limited Liability Company. The names and addresses of the initial Manager is as follows:

Emily Lynn Cartwright  
4505 SE County Road 760  
Arcadia, FL 34266

The undersigned, being a Member of the Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of FLORIDA QUILTER, LLC.

Executed by the undersigned on September 7, 2011.

FLORIDA QUILTER, LLC



By: Entrust Freedom LLC fbo  
Emily Lynn Cartwright IRA, Member

Entrust Freedom, LLC



By: \_\_\_\_\_  
IRA Administrator  
EIN # 27-0275515



**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**


PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is FLORIDA QUILTER, LLC.
  
2. The name and the Florida street address of the registered agent and office are: Emily Lynn Cartwright, 4505 SE County Road 760, Arcadia, FL 34266.

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.

  
Emily Lynn Cartwright

Entrust Freedom, LLC

By:   
IRA Administrator  
EIN # 27-0275515