

L11000108457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

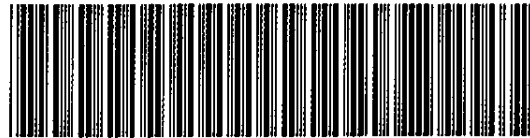
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500212220425

09/21/11--01021--020 **155.00

FILED
11 SEP 21 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

G. MCLEOD

SEP 22 2011

EXAMINER



WILLIAMS MULLEN

Direct Dial: 202.293.8143
bnowak@williamsmullen.com

September 20, 2011

VIA OVERNIGHT FED EX

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Fourth Party Reverse Logistics, LLC – Articles of Organization for Immediate Filing

Dear Sir or Madam:

Enclosed for filing are the Articles of Organization of Fourth Party Reverse Logistics, LLC (“Articles of Organization”) to effect the formation of that entity immediately upon your receipt and acceptance hereof.

Also enclosed is a check for \$155.00 payable to “Florida Secretary of State” in payment of the filing fees (\$125) and certified copy fee (\$30). Please return the certified copy of the Articles of Organization to me in the enclosed postage-paid envelope to evidence your receipt and filing.

Please do not hesitate to call me at (202) 293-8143 if you have any questions.

Sincerely,

Bradley J. Nowak

Enclosures

cc: Robert A. Burich
Thomas B. McVey

15903213_1.DOC

A Professional Corporation

NORTH CAROLINA • VIRGINIA • WASHINGTON, D.C. • LONDON

1666 K Street, N.W., Suite 1200 Washington, D.C. 20006 Tel: 202.833.9200 Fax: 804.783.6507 or 202.293.5939
www.williamsmullen.com

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Fourth Party Reverse Logistics, 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:

1851 Crayton Road
Naples, Florida 34102

Mailing Address:

1851 Crayton Road
Naples, Florida 34102

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:

Susan A. Burich

Name

1851 Crayton Road

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

Naples

FL 34102

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..

Susan A. Burich

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
11 SEP 21 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MGRM

Susan A. Burich


1851 Crayton Road

Naples, Florida 34102

(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.)

Susan A. Burich

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)