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B. BOSTICK
OCT 5 2011
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporation of Corporation (Corporation Corporation)				
SUBJEC	_{CT:} Eric Clir		al Libilia C		
		Name of Limit	ed Liability Compar	ny	
The encl	osed Articles of Or	ganization and fec(s) are	submitted for filing.		
Please re	eturn all correspond	ence concerning this mat	ter to the following:		
E	Eric Clintor	1			
		•	Name of Person		to the state of th
_	ERIC CLIN	TONLLC			Ts: =
			Firm/Company		58 8 7
	117 bragg o	ir #7	•		HAS:
_			Address		
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u	ıniquerasool1	4banging@yahoo	.com		500
_		E-mail address: (to be used to		rt notification)	
For furth	ner information con	cerning this matter, please	e call:		
ERIC	CLINTON		_at (_850)	210-8243	
	Name of P	erson	Area Code	& Daytime Telephone Nun	nber
Enclose	ed is a check for th	ne following amount:			
\$125.00		130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	ey Certific is enclosed) Certific	0 Filing Fee, cate of Status & cd Copy hal copy is enclosed)
	1 1	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Registration of Clifton Bu	of Corporations	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Αŀ	₹T	IC	LE	1	_]	Nя	me	

The name of the Limited Liability Company is:

ERIC CLINTON L LC

(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:

Mailing Address:

117 BRAGG DR #7

TALLAHASSEE FLA 32301

WAYNE JACOBS PO BOX 1562 WOODVILE FLA 32362

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:

WAYNE JACOBS

Name

26 ANDREWS STEARS

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

CRAWFORDVILLE

LE FL 32327
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stand 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..

(CONTINUED)

Page 1 of 2

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

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

ERIC CLINTON MGR	117 BRAGG DR #7 TALLAHASSEE FLA 32301	_
		-
ADRIAN McFORD MGRM	2959 APALACHEE PKWY #B 11	_
	TALLAHASSEE FLA	_
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(Use attachment if necessary)		
CENT DOCKET IN COLD AT A	(OPTIL	ONI.
	ne date of filing: (OPTI) be specific and cannot be more than five business	

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.)

ERIC CLINTON

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)