

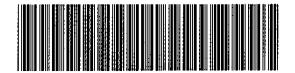
(Re	equestor's Name)				
(Address)					
(Ac	ldress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Ви	isiness Entity Nar	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				

Office Use Only

G. MCLEOD

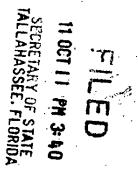
OCT 12 2011

EXAMINER



900212866709

10/11/11--01048--009 **125.00



COVER LETTER

•	TO: Registration Section Division of Corporations
	SUBJECT: Centralia Publishing, L.L.e
	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:
	Tim Martin
	Name of Person
	Centralia Publishing, L.L.C. Firm/Company
	Firm/Company
	33279 Pennsylvania Avenue
	Address
	Ridge Manor, FL 33523 City/State and Zip Code
	Centralia. Publishing @ gmail. Com E-mail address: (to be used for future annual report notification)
	For further information concerning this matter, please call:
	Tim Martin at (352) 467-9622 Name of Person Area Code & Daytime Telephone Number
,	Enclosed is a check for the following amount:
≱ \$	S125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} Certified Copy (additional copy is enclos
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cent	ralia Pu	blishing	, L.L.C				
(M	lust end with the wor	rds "Limited Liabili	ty Company	, "L.L.C.," or "LL	C.")		
ARTICLE II - Ac The mailing addre		dress of the pri	incipal of	fice of the Lin	nited Liabili	ty Com	pany is:
Principal Office Address:		Mailing Address:					
33279 Penns Ridge Manor,	ylvania Au FL 33583	enu <u>e</u> 3	3327 Ridge	19 Rennsylv Manor, Fi	uania Aue _ 385a3	1ue 	·
ARTICLE III - F (The Limited Liability C business entity with an	Company cannot serv active Florida regist	ve as its own Registerration.)	ered Agent.	You must designat			
The name and the			_	agent are:	A	1 00 FICR	disp _{inite}
Timothy Mart		-111		- HAS	計画		
		Pennsylva	_	venue	SEE. F	- 79.	
		Florida street add			able) Control	PH 3: 40	D
		City, Sta	ite, and Zip		_	_	
registered agent a statutes relating	any at the place and agree to act	designated in th in this capacity nd complete pe	his certific . I further rformance	cate, I hereby or r agree to com c of my duties,	accept the app ply with the p and I am fan	pointme provisio niliar wi	ent as ons of all ith and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICI	Æ	IV-	Manager(s)	or Man	aging l	Member	(s)):
---------------	---	-----	------------	--------	---------	--------	-------------	----

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

Title:	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member			
merm	Tim Martin		
	33279 Pennsylvania Avenue Ridge Manor, FL 33503		
·			

(Use attachment if necessary)

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.)

Timothy Martin
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)