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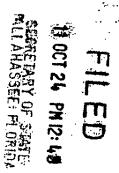
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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J. BRYAN

OCT 25 2011

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: LD Systems, LLC	
	ted Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this mat	tter to the following:
Linda D. Sutphen	S. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
	Name of Person
LD Systems, LLC	
	Firm/Company
18 Cormorant Circle	
	Address
Daytona Beach, FL 32119	
	ty/State and Zip Code
sutphenl@bellsouth.net E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, pleas	e call:
Linda D. Sutphen	at (386 ) 322-1599
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# LD Systems, 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:	Mailing Address:
18 Cormorant Circle	18 Cormorant Circle
Daytona Beach, FL 32119	Daytona Beach, FL 32119

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:

Linda D. Sutphen	
Na	nme
18 Cormorant (	Circle
Florida street	t address (P.O. Box NOT acceptable)
Daytona Beach	<sub>FL</sub> 32119
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..

Registered Agent's Signature (REQUIRED)

(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:

MGRM	Linda D. Sutphen
	18 Cormorant Circle
	Daytona Beach, FL 32119
	5
<del></del>	
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: (OPTIONAL)
effective date is listed, the date must b	pe specific and cannot be more than five business days
0 days after the date of filing.)	

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.)

# Linda D. Sutphen

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)