

L11000136067

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2011

SUSAN MARIE KILUK ERWIN
1390 TRIPOLI STREET
NORT PORT, FL 34286

SUBJECT: SUSAN M. KILUK EAWIN PUBLISHING OF NORTH PORT FL LLC
Ref. Number: W11000058091

We have received your document for SUSAN M. KILUK EAWIN PUBLISHING OF NORTH PORT FL LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent information is illegible please type or print more clearly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 211A00025938

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUSAN M. KILUK ERWIN Publishing of NORTH PORT, FL
Name of Limited Liability Company L.L.C.

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SUSAN MARIE KILUK ERWIN

Name of Person

SUSAN KILUK ERWIN Publishing of NORTH PORT, FL L.L.C.

Firm/Company

1390 TRIPOLI STREET

Address

NORTH PORT, FL 34286

City/State and Zip Code

SUSANERWIN1@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew ERWIN

Name of Person

at (941) 240-2896

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 & 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:

Susan Kiluk Erwin Publishing of North Port FL L.L.C.

(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:

1390 Tripoli Street
North Port, FL 34286

Mailing Address:

1390 Tripoli Street
North Port, FL 34286

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:

James Abraham

Name

2455 Achilles Street

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

Port Charlotte, FL FL 33980


City, State, and Zip

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TALLAHASSEE, FLORIDA

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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)

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:

MGR

SUSAN M. KILUK ERWIN
1390 TRIPOLI ST.
NORTH PORT, FL 34286

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TALLAHASSEE FLORIDA

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Nov. 11, 2011 (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:

Susan M. Kiluk Erwin
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 M. KILUK ERWIN
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)