# L12000024752

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

B. KOHR

FEB 2 2 2012

**EXAMINER** 



200222407072

02/20/12--01033--005 \*\*160.00

12 FEB 20 AM 9: 41

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Blue Collar Commerce L	LC.
	Liability Company
The enclosed Articles of Organization and fee(s) are sul	LIC. Liability Company  mitted for filing.
Please return all correspondence concerning this matter	to the following:
Patrick Gerry	
	ame of Person
Blue Collar Commerce LLC	•
Fi	irm/Company
1101 Portmoor Way	
	Address
Winter Garden, Florida 34787	
City/S	tate and Zip Code
pat@patgerry.com	future annual report notification)
	•
For further information concerning this matter, please ca	III:
Patrick Gerry	Area Code & Daytime Telephone Number
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\int \\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Status & 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	Street/Courier Address Registration Section Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COM

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

The name of the Limited Liability Company is:

# Blue Collar Commerce 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:
1101 Portmoor Way	1101 Portmoor Way
Winter Garden, FL 34787	Winter Garden, FL 34787

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:

Patrick Gerry	
	Name
1101 Portmoo	r Way
Florida stro	cet address (P.O. Box NOT acceptable)
Winter Garden	<sub>FL</sub> 34787
C	ity. 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..

(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	Patrick Gerry
	1101 Portmoor Way
	Winter Garden, FL 34787
Use attachment if necessary)	
	e date of filing: (OPTIONA
•	4.70

**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.)

Patrick Gerry

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)