## 112000046497

(Requestor's Name)
(Requestor's Name)
(Address)
(1001000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
·
Special Instructions to Filing Officer:

Office Use Only



700227051597

04/03/12--01023--017 \*\*130.00

2012 APR -3 AM 8: 24
SECRETARY OF STATES
TALL AHASSEE FLORING

J. SAULSBERRY EXAMINER APR 4 2012

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Life In 30 Seconds LLC.  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:	
Kimberly A. Dans	
Name of Person	
Firm/Company	
13486 Sunstone Street	
13486 Sunstone Street  Address  Address  City/State and Zip Code  City/State and Zip Code  E-mail address: (to be used for future annual report notification)	• ]
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	ELA 7
Bruce Smith CPA at (904) 624-1002  Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & Certificate of Status}\$  Certificate of Status \$\text{Certified Copy (additional copy is enclosed)}\$  Certified Copy (additional copy is enclosed)	
Mailing Address  Registration Section  Registration Section  Registration Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:
(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:
13486 SUNSTONE STREET  JULISON IVE FL 32258  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:  What A. Dans  Name  13486 Sunstone Street  Florida street address (P.O. Box NOT acceptable)  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)

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

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

	." = Manager .M" = Managing Member	Name and Address:
Ma	<u>em</u>	Limberty A. Davis 13486 Sunstone Street Vicksonville PL 32250
		ZOIZ SEC TALL
		PR -3 AM SEEL FL
(Use a	ttachment if necessary)	
(If an effective	Effective date, if other than the date is listed, the date must be sufter the date of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior
REQU	UIRED SIGNATURE:	e Oy Ds
		or an authorized representative of a member.  08(3), Florida Statutes, the execution of this document

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)