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D. BRUCE

APR. 1 0 2012

EXAMINER

COVER LETTER

TO:	Registratio Division of	n Section Corporations		
SUBJI	ECT: New	Ad Space LLC	11:12:0	
		Name of Limit	ed Liability Company	
The en	closed Article	s of Organization and fee(s) are	submitted for filing.	
Please	return all corr	espondence concerning this matt	er to the following:	
	Brent L	augesen		
			Name of Person	
	Adverti	sing space		
			Firm/Company	
	2057 Li	ttle Neck rd		······································
			Address	## (g . ===
(Clearwat	er FL 33755		2 7 T
			y/State and Zip Code	ASS. 49
	Brent@lu	xuryhomesown1.com	or future annual report notification)	m
For fur	ther informati	on concerning this matter, please	•	OF STAT
Bren	t Laugese	.	at (727) 735-1510)
	Na	me of Person	Area Code & Daytime Telephone Nu	mber
Enclos	sed is a check	k for the following amount:		
\$125.00) Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certification	00 Filing Fee, icate of Status & ied Copy onal 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 Compan	ny is:
New Ad Space 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	he principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
2057 Little Neck rd. Clearwater FL 33755	2057 Little Neck rd. Clearwater FL 33755
	المستعم أرجيا المالية
Brent Laugesen	Vame To E
2057 Little Ned	SA :
Florida stre	eet address (P.O. Box NOT acceptable)
Clearwater	_{FL} 33755
Ci	ty, State, and Zip
Having hear named as registered agent an	nd to accept service of process for the above stated limited

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

Title: "MGR" = Manage "MGRM" = Mana		Name and Address:	
MGRM		Brent Laugesen	
		2057 Little Neck Rd.	
	•	Clearwater, FL 33755	
MGRM		Lennart Persson	•
	_	620 Bayway Blvd.	
		Clearwater, FL 33767	· · · · · · · · · · · · · · · · · · ·
		· ·	
•			
	_	•	
,			
Use attachment if	necessary)		
LE V: Effective da fective date is liste	ate, if other than the	e date of filing: be specific and cannot be more than	(OPTIONA
LE V: Effective da fective date is liste	ate, if other than the	e date of filing:	(OPTIONA five business da
LE V: Effective da fective date is liste days after the date	ate, if other than the d, the date must le of filing.)	e date of filing: be specific and cannot be more than the specific and the sp	(OPTIONA five business da
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of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)