

L120000067536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

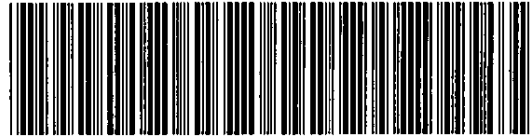
Special Instructions to Filing Officer:

Office Use Only

B. KOHR

MAY 18 2012

EXAMINER



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05/07/12--01026--005 \*\*125.00

12 MAY 17 PM 3:57

RECEIVED  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 10, 2012

STEPHANIE SHIELDHOUSE  
HIGHWAY PRESS LLC  
1468 EDGEWOOD CIRCLE  
JACKSONVILLE, FL 32205

SUBJECT: HIGHWAY PRESS LLC  
Ref. Number: W12000026172

FILED  
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DIVISION OF CORPORATIONS  
MAY 17 PM 3:51

We have received your document for HIGHWAY PRESS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We show no company listed as RICHARD SHIELDHOUSE INC.

Did you mean for the Registered Agent to be SHIELDHOUSE INC.? Or is the individual Richard Shieldhouse supposed to be the R.A.?

Please clarify.,

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) 245-6051.

Buck Kohr  
Regulatory Specialist II

Letter Number: 312A00014059

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Highway Press LLC  
Name of Limited Liability Company

RECEIVED  
DIVISION OF CORPORATIONS  
12 MAY 17 PM 3:57

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

Please return all correspondence concerning this matter to the following:

Stephanie Shieldhouse  
Name of Person

Highway Press LLC  
Firm/Company

1468 Edgewood Cir  
Address

Jacksonville, FL 32205  
City/State and Zip Code

Steph@shieldhouse.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

S Shieldhouse  
Name of Person

at ( 904 ) 343 9475  
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:

Highway Press LLC  
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

FILED  
DIVISION OF CORPORATIONS  
12 MAY 17 PM 3:57

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

4810 Highway Ave  
Jacksonville FL  
32254

### Mailing Address:

1468 Edgewood Cir  
Jacksonville FL  
32205

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

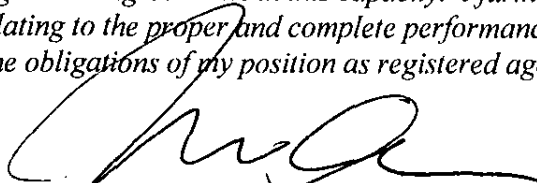
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Richard Shieldhouse ~~SHIELDHOUSE~~ SS  
Name

1468 Edgewood Circle  
Florida street address (P.O. Box **NOT** acceptable)  
Jacksonville FL 32205  
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:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Stephanie Shieldhouse  
1468 Edgewood Cir  
Jacksonville FL 32205

MGRM

Richard Shieldhouse  
1468 Edgewood Cir  
Jacksonville FL 32205

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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:**

  
\_\_\_\_\_  
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.)

Stephanie Shieldhouse  
\_\_\_\_\_  
Typed or printed name of signer

**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)**