

(Reque	estor's Name)	·
(Addre	ss)	
(Addre	ss)	·
(City/S	tate/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nan	ne)
(Docui	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	

Office Use Only

FEB 28 2013 G. MCLEOD



800245089078

02/27/13--01002--005 **125.00

13 FEB 27 PH 12: 11

(850) 245-6051.

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Competitive Warehousing Holding Company

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:

Douglas Skuba

Name of Person

Competitive Warehousing Holding Company

Firm/Company

292 American Spirit road

Address

Winter Haven, FL 33880

City/State and Zip Code

doug@americanspiritstorage.com

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

For further information concerning this matter, please call:

Douglas Skuba

.,863

221-5804

Name of Person

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)

Sed) C

Certificate of Status & Certified Copy (additional copy is enclosed)

□ \$160.00 Filing Fee,

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 i	is:			
Competitive Warehousing Holding Company				
(Must end with the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Li	ability Cor	mpan	y is:
Principal Office Address:	Mailing Address:			
292 American Spirit Road	292 American Spirit Road			
Winter Haven, FL 33880	Winter Haven, FL 33880			
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Reg	ed Office, & Registered Agent's	Signatur	e:	
business entity with an active Florida registration.)	gistered Agent. Tou must designate an indivi	dual or anothe	er	
The name and the Florida street address of the	e registered agent are:			
Douglas Skuba		April 19 de la companya de la compan	13	
Nan	ne	বিশ্বনা প্রকর্মের পুরুত্ব প্রকাশন বিশ্বনা নাম ব	FEB	M off pra
292 American Spirit Road		1.11 (***) 2.11 (***)	EB 27	,7A-909E
Florida street a	address (P.O. Box NOT acceptable)	Facility of the Park	3	1.4
Winter Haven,	_{FL} 33880	ED	PM IZ: J	ing property
City,	State, and Zip		_	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this cape all statutes relating to the proper and complete and accept the obligations of my position as Registered Agent's Signature	n this certificate, I hereby accept the acity. I further agree to comply will be the performance of my duties, and registered agent as provided for in the factor of the acture (REQUIRED)	he appointi ith the prov ! I a <mark>m</mark> famil	ment d vision liar w	as s of rith
(CONTI	(NUED)			

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:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
Widnaging Wember	
MGRM	DOUGLAS SKUBA
	292 AMERICAN SPIRIT ROAD
	WINTER HAVEN, FL 33880
<u></u>	
	
(Use attachment if necessary)	
(Use attachment if necessary) CLE V: Effective date, if other the	nan the date of filing: (OPTIONAL
CLE V: Effective date, if other the	nan the date of filing: (OPTIONAL emust be specific and cannot be more than five businessing.)
CLE V: Effective date, if other the effective date is listed, the date of file or 90 days after the date of file.	e must be specific and cannot be more than five business
CLE V: Effective date, if other the effective date is listed, the date	e must be specific and cannot be more than five business
CLE V: Effective date, if other the effective date is listed, the date of file or 90 days after the date of file.	e must be specific and cannot be more than five business
CLE V: Effective date, if other the effective date is listed, the date of file or 90 days after the date of file.	e must be specific and cannot be more than five business
CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of file REQUIRED SIGNATURE:	e must be specific and cannot be more than five businessing.)
CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of fil REQUIRED SIGNATURE: Signature of a	member or an authorized representative of a member.
CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of fil REQUIRED SIGNATURE: Signature of a librateordance with sect	member or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution of this document
CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of file REQUIRED SIGNATURE: Signature of a light date of	member or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. In information submitted in a document to the Department of State
CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of file REQUIRED SIGNATURE: Signature of a light date of	member or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. In information submitted in a document to the Department of State is felony as provided for in s.817.155, F.S.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)