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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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SECRETARY OF STATE

# **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT: GOM	- Vending Named Limit	ted Liability Company		
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the following:		
	Steven L	How		
	·	Name of Person		
Firm/Company				
803 West River Dr				
		Address		
Tampa, Fl 33617 City/State and Zip Code				
	steve ludi	of Mail, Can for luture annual report notification)		
For further information	concerning this matter, please	e call:		
Staven Willow at (813) 770-95/9 Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for	or 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)	
Already sen Ifiling under her name	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 C Tallahassee, FL 32301		



February 26, 2013

STEVEN LUDLOW 803 W. RIVER DRIVE TAMPA, FL 33617

SUBJECT: LUDLOW CO LLC Ref. Number: W13000011486

We have received your document for LUDLOW CO 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

Please return your document, along with a copy of this letter, within 60 days or vour filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 613A00004572

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

### **ARTICLE II - Address:**

**Principal Office Address:** 

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

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

Mailing Address:

803 Whire Pr	403 W. King Dr
Tonpa, F1 33617	Tampa, F1, 33617

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:

Steven Lodon

Name

803 West River Dy

Florida street address (P.O. Box NOT acceptable)

72 FL 33617

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)

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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	Steven Lydlow  503 west live or Tangon F1, 33617
(Heaptrachment if magazage)	
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must prior to or 90 days after the date of filing.)	date of filing:
REQUIRED SIGNATURE:	
Signature of a member	or an authorized representative of a member.
constitutes an affirmation under t I am aware that any false informa	408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)

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)

Steven Lyding
Typed or printed name of signee