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B. BOSTICK
SEP 0 5 2013
EXAMINER

(850) 245-6051.

COVER LETTER

TO:

Registration Section **Division of Corporations**

Fun Solar Gadgets, 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:

James Norrish	lame of Person		
	Firm/Company		
9164 SE Hawks Nest	Ct.		
	Address		
Hobe Sound, Florida	33455		TALLAHA
· City/	State and Zip Cod	de	2.6
jimnorrish@hotmail.com			ASS
E-mail address: (to be used for	future annual re	oort notification)	m-<
further information concerning this matter, please c	all:		mar :
m Norrish	772	⁵⁴⁵⁻⁹⁶³⁶	08107

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) ■ \$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:		
Fun Solar Gadgets, LLC		
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
9164 SE Hawks Nest Ct	9164 SE Hawks Nest Ct.	
Hobe Sound, Florida 33455	Hobe Sound, Florida 33455	
ARTICLE III - Registered Agent, Registered (Office & Degistered Agent's Signature.	
(The Limited Liability Company cannot serve as its own Register		
business entity with an active Florida registration.)		
The name and the Florida street address of the reg	gistered agent are:	
	ASS. 1 F	
James Norrish Name		
Name	그를 꾸 다	
9164 SE Hawks Nest Ct.		
Florida street addre	ess (P.O. Box NOT acceptable)	
Hobe Sound	FL 33455	
City, State	e, and Zip	
	cent 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

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM James Norrish 9164 SE Hawks Nest Ct. Hobe Sound, FL 33455 MGRM Jan Norrish 9164 SE Hawks Nest Ct. Hobe Sound, FL 33455 (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:**

(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.)

Signature of a member or an authorized representative of a member.

James Norrish Typed or printed name of signee

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)