

L13000170436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

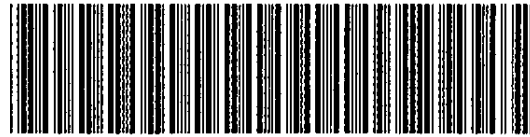
Certified Copies ☒

Certificates of Status ☒

Special Instructions to Filing Officer:

Mr. Castillo gave permission
to correct title as
mrgm and remove. Effective
Date.
[Signature]

Office Use Only



900254062669

11/22/13--01007--023 **160.00

FILED
13 DEC -9 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~11/23-606107~~

12/
[Signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 3, 2013

AMILCAB ANTONIO CASTILLO
3755 ROLLINGSFORD CIR
LAKELAND, FL 33810

SUBJECT: ON LINE INFO ADS LLC
Ref. Number: W13000066107

We have received your document for ON LINE INFO ADS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 613A00027551

(850).245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: On line info Ads 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:

Amilcar Antonio Castillo

Name of Person

On line info Ads LLC

Firm/Company

3755 Rollingsford circle

Address

Lakeland, Florida 33810

City/State and Zip Code

ftc008@msn.com

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

For further information concerning this matter, please call:

Amilcar Castillo

Name of Person

at (**863**) **8580309**

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:

On line info Ads 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 principal office of the Limited Liability Company is.

Principal Office Address:

3755 Rollingsford circle

Lakeland, Florida 33810

Mailing Address:

3755 Rollingsford circle

Lakeland, Florida 33810

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:

Amilcar Antonio Castillo

Name

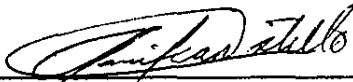
3755 Rollingsford circle

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

Lakeland, Florid 33810 FL

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)

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13 DEC -9 AM 10:30
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TALLAHASSEE FLORIDA

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:

Amilcar Castillo - MGRM

3755 Rollingsford circle

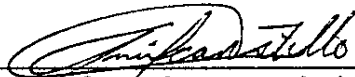
Lakeland, Florida 33810

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: November 18th 2013 (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.)

Amilcar Castillo

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)

FILED
13 DEC -9 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA