

2/26/2015

Division of Corporations

Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS
REGISTRATION
INFORMATION SERVICES

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: wendblocker6@gmail.com

FLORIDA LIMITED LIABILITY CO.
The East Milton Lounge LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
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Electronic Filing Menu

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B. BOSTICK

FEB 27 2015

EXAMINER

H15000050377

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The East Milton Lounge 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:**Mailing Address:**8121 Highway 90
Milton, FL 325838121 Highway 90
Milton, FL 32583**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:

Wendi Blocker

Name

5048 East Lake RoadFlorida street address (P.O. Box **NOT** acceptable)Milton

City

FL 32583

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 605, F.S.


Registered Agent's Signature (REQUIRED)

Wendi Blocker

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Page 1 of 2

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H15000050377

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member:

"MGR" = Manager

AMBRName and Address:Wendi Blocker5048 East Lake RoadMilton, FL 32583

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

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

(In accordance with section 605.0203 (1) (b), 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.)

Wendi Blocker_____
Typed or printed name of signee2015 FEB 26 A 11:07
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