

L 97000000539

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

300002182863--4
-05/19/97--01079--026
****215.00 ****215.00

SUBJECT: "OPORTUNITY 2000" LLC

(Proposed corporate name - must include suffix)

800002151728--1
-04/23/97--01074--016
****70.00 ****70.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: JILL M. GIDEON
Name (Printed or typed)

4630 WESTFORD CIRCLE

Address

TAMPA, FLORIDA 33624

City, State & Zip

813-264-4243

Daytime Telephone number

FILED
97 MAY 13 PM 2:51
SECRET
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

APR 24 1997
[Signature]



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 24, 1997

JILL M. GIDEON
4630 WESTFORD CIRCLE
TAMPA, FL 33624

SUBJECT: OPPORTUNITY 2000, LLC
Ref. Number: W97000009524

We have received your document for OPPORTUNITY 2000, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of organization must be prepared in compliance with section 608.407, Florida Statutes. Please refer to this section of the law.

The effective date is not acceptable since it is not within five working days of the date of receipt.

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 (904) 487-6933.

Dana Calloway
Document Specialist

Letter Number: 297A00021179

*I have sent a check for \$215.00 as you still
have my \$70.00 check.*

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

"OPPORTUNITY 2000" LLC

ARTICLE II - Address:

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

4630 WESTFORD CIRCLE
TAMPA, FLORIDA 33624

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

THIRTY YEARS

ARTICLE IV - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

JILL M. GIDEON
4630 WESTFORD CIRCLE
TAMPA, FLORIDA 33624

JIM WILLIAMS
5435 MISTY LAKE DR.
MULBERRY, FLORIDA 33860

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

ANY NEW MEMBER TO BE ADMITTED NEED AN UNANIMOUS
VOTE OF THE REMAINING MEMBERS.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

ANY OF THE ABOVE CONDITIONS WILL CAUSE DISSOLUTION OF
THE ENTITY. HOWEVER, THERE MUST BE UNANIMOUS CONSENT
OF THE MEMBERS TO REVOKE A DISSOLUTION.

NOTE: If no provisions are to be made in Article V and VI remove this page before submitting for filing with the Department of State.

ARTICLE VII

THE DATE OF FORMATION OF THIS LLC KNOWN AND RECORDED
AS "OPPORTUNITY 2000" LLC IS APRIL 15, 1997.

ARTICLE VIII

THE PURPOSE OF BUSINESS IS NETWORK MARKETING.

ARTICLE IX

ALLOCATIONS OF PROFITS, LOSSES, INCOME, GAINS, DEDUCTIONS,
AND CREDITS ARE TO BE SHARED EQUALLY.

ARTICLE X

COMPANY MEETINGS ARE TO BE HELD AT LEAST ANNUALLY
AND ALL VOTING DECISIONS MUST BE UNANIMOUS.

ARTICLE XI

THIS ORGANIZATION DOES NOT HAVE FREE TRANSFERABILITY OF
INTERESTS. THERE MUST BE UNANIMOUS CONSENT OF THE OTHER
MEMBERS OF AN ASSIGNEE TO HAVE FULL MEMBERSHIP RIGHTS. AN
ASSIGNEE IS A PERSON WHOM A MEMBER MAY ASSIGN HIS INTEREST
IN THE ORGANIZATION, WHETHER IT BE IN MANAGING OR
DISTRIBUTION OF PROFITS ETC. "OPPORTUNITY 2000" LLC DOES NOT
ALLOW ANY ASSIGNEE TO BECOME A MEMBER WITHOUT UNANIMOUS
CONSENT OF THE OTHER MEMBERS.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____

"OPPORTUNITY 2000" LLC

_____ deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 0
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ 0
- 5) the total amount of 2, 3, and 4 is \$ 0

Jim M. Geden

Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the
execution of this affidavit constitutes an affirmation under the
penalties of perjury that the facts stated herein are true.)

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

" OPPORTUNITY 2000 " LLC

2. The name and address of the registered agent and office is:

JILL M. GIDEON

(Name)

4630 WESTFORD CIRCLE

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

TAMPA, FLORIDA 33624

(City/State/Zip)

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TALLAHASSEE, FLORIDA

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.

Jill M. Gideon
(Signature)

5/12/96
(Date)

Filing Fee: \$ 35 for Designation of Registered Agent