

# L97000001227

**AUTOBAGGER, L.C.**

120 WGTO Tower Road • Polk City, FL 33868 • Telephone (941) 956-0109

October 28, 1997

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

600002336736--4  
-11/03/97--01151--001  
\*\*\*\*293.75 \*\*\*\*293.75

Attention: Sandra B. Mortham

Thank you for review of the enclosed documents for filing articles of organization for Autobagger, L.C.

Also enclosed is a check in the amount of \$293.75, breakdown as follows:

Filing Fee for Articles of Organization and Affidavit . . . . .	\$ 250.00
Designation of Registered Agent . . . . .	35.00
Certificate of Status . . . . .	8.75
<b>Total Paid</b>	<b>\$ 293.75</b>

Please contact Stephen M. Felder or me at the above address and/or phone number for any additional information.

Sincerely,

*Victoria A. Felder*

Victoria A. Felder  
Registered Agent Applicant  
Autobagger, L.C.

Enclosures: (5)

L97-1227

Name	OC 11-4
Availability	
Document Examiner	OC
Updater	OC
Updater Verifier	OC
Acknowledgment	OC
W. P. Verifier	OC

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97 NOV -3 PM 2:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER  
FOR FLORIDA LIMITED LIABILITY COMPANY**

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

**SUBJECT:** Autobagger, L.C.  
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit  
\$ 35.00 Designation of Registered Agent

A letter of acknowledgment will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50. **Please send one check for the total amount made payable to the Florida Department of State.**

**FROM:** Stephen M. Felder  
Name (Printed or typed)

120 W.G.T.O. TOWER Rd.  
Address

Polk City FL 33868  
City, State & Zip

941-956-0109  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Autobagger, L.C.

**ARTICLE II - Address:**

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

120 W.G.T.O. Tower Rd., Polk City, FL 33868

**ARTICLE III - Duration:**

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

5 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:

Victoria A. Felder  
120 W.G.T.O. Tower Rd.  
Polk City FL 33868

Stephen M. Felder  
120 W.G.T.O. Tower Rd.  
Polk City FL 33868

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TALLAHASSEE, FLORIDA

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of \_\_\_\_\_  
Autobagger, L.C. 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 \$ 200
- 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 \$ 1,000
- 5) the total amounts of 2, 3 and 4 is \$ 1,200

Victoria A. Felder  
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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TAMPA 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: Autobagger, L.C.

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

Victoria A. Felder  
(NAME)

120 W.G.T.O. Tower Rd.  
(P. O. Box NOT ACCEPTABLE)

Polk City FL 33868  
(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.*

Victoria A. Felder  
(SIGNATURE)

10/28/97  
(DATE)

**Filing Fee: \$ 35 for Designation of Registered Agent**