# L98000000857

## TRANSMITTAL LETTER FOR FLORIDA LIMITED LIABILITY COMPANY

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

SUBJECT: Big Bro 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 acknowledgement 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:	Joel Moser Name (Printed or typed)	-06/22/9801129002 *****292.75 *****292. <b>76</b>
Name 6133198 — Availability dcc	4713 Cason Cove Dr. #1606 Address	
Document Examiner	Orlando, FL 32811 City, State & Zip	CRETAS LAHAS
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Up a er Verityer	Daytime Telephone number	
Ackne ledgement		00 DA
W. P. Verifyer	L98000000857	

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Big Bro L.C.

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability

Company is:

4713 Cason Cove Drive #1606

Orlando, FL 32811

**ARTICLE III - Duration:** 

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

perpetual

**ARTICLE IV - Management:** (check and complete the appropriate statement)

98 JUN 22 PM 2: 00 SECNETARY OF STATE TALLAHASSEE, FLORIDA

☐ 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:

Joel Moser 4713 Cason Cove Dr. #1606 Orlando, FL 32811 Thomas Moser 4713 Cason Cove Dr. #1606 Orlando, FL 32811

Matthew Gunter
3200 Old Winter Garden Rd.
# 1322
Ocoee, FL 34761

Todd Gilbert 6192 Raleigh St. #320 Orlando, FL 32835

#### AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member	r of	_
Big Bro L.C.	leposes and says	98
1) the above named limited liability company has at least two members	CRETARY OF S LAHASSEE, FI	FILED JUN 22 PH
2) the total amount of cash contributed by the member(s) is	. OR ID	0/2
3) if any, the agreed value of property other than cash contributed by a A description of the property is attached and made a part hereto.	member(s) is \$	1,000
4) the amount of cash or property anticipated to be contributed by me. This total includes amounts from 2 and 3 above.	mber(s) is \$\frac{4}{2}	, 040

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.)



### **Fax Cover Sheet**



#### 9/22/98

To: Diane Cushings

From: Joel Moser

Company:

**Company:** Big Bro L.,C.

Fax Number: 1 (850) 487-6013

Fax Number: (407) 426-8579

Pages including this cover page: 1

Subject:

#### Message:

Diane,

Please be advised the contribution from members of Big Bro L.C. is contribution of intellectual property. Please let me know if you need more information. Thanks.

Joel Moser

SECRETARY OF STATE

### 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	of the limited liability company is:	Big Bro L.C.	98 TALL
2. The name a	and address of the registered agent ar	nd office is:	JUN 22 PH 2: 00 RETARY OF STATE AHASSEE, FLORIDA
	Joel Moser	-	
<u></u>	(NAME)		_
	4713 Cason Cove Dr. #1 (P. O. Box NOT ACCEP		<b>–</b> .
	Orlando, FL 32811 (CITY/STATE/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.

(SIGNATURE) 6 - 10 - 98 (DATE)

Filing Fee: \$ 35 for Designation of Registered Agent