

L 99000005101

MEMO

TO: FLORIDA DEPARTMENT OF STATE

FROM: MICHAEL A. FERREIRA

SUBJECT: HEIRLOOMS UNLIMITED LLC

DATE: 08/09/99

Enclose please find all necessary completed forms to establish a Limited Liability Company.

Also enclosed is a check in the amount of \$346.25 for Filing fees, Designation of registered agent, a certified copy, and a certificate of status.

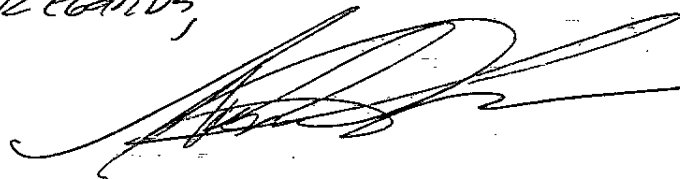
Please process this as soon as possible.

Thank-you

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Please CONTACT me at
941-544-6453 with any
QUESTIONS.

Regards,



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:

Heirlooms Unlimited LLC

ARTICLE II - Address:

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

*4028 Crockers Lake Boulevard #715
Sarasota, Florida 34238*

ARTICLE III - Duration:

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

Perpetual

ARTICLE IV - Management:

(Check the appropriate box and complete the 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:

*MICHAEL A. FERREIRA
4028 CROCKERS LAKE BLVD #715
SARASOTA, FLORIDA 34238*

*ALBERT F. FORD II
7152 POINT OF ROCKS CIRCLE
SARASOTA, FLORIDA 34242*

ARTICLE V - Admission of Additional Members:

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

*UPON UNANIMOUS VOTE OF
CURRENT MEMBERS.*

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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:

Limited Liability Company shall be dissolved and Assets Divided amongst surviving members and deceased or otherwise dissolved member or heirs, in accordance with operating Agreement.

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of Heirlooms Unlimited LLC certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 1000.00 ;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 1000.00 ;
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 2000.00 .


Signature of a member or an 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.)

MICHAEL A. FERREIRA
Typed or printed name of signee

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Filing Fee: \$250.00 for Articles and Affidavit

Description of property contributed
to Heirlooms Unlimited LLC;

one Gateway #400 Computer
Serial Number 0013258499

Value = \$1,000.00

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**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 TO DESIGNATE A REGISTERED OFFICE AND
REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Heirlooms Unlimited LLC

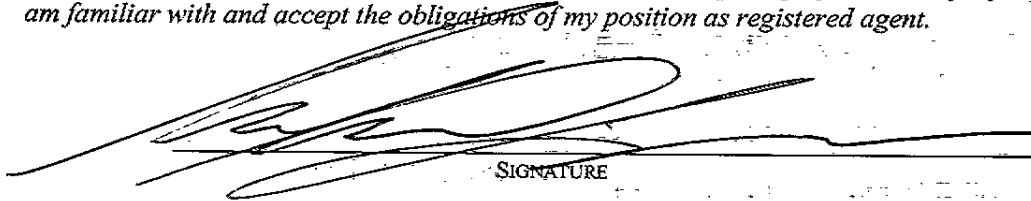
2. The name and the Florida street address of the registered agent are:

Michael A. FERREIRA
NAME

4028 ROCKERS LAKE BOULEVARD #715
Florida street address (P. O. Box **NOT** ACCEPTABLE)

SARASOTA FL 34238
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.


SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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TALLAHASSEE FLORIDA

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