



### FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

September 21, 1999

SUSAN FENICH 3425 IMPERIAL LANE LAKELAND, FL 33813

SUBJECT: SHOPKEYPER L.L.C. Ref. Number: W99000021738

We have received your document for SHOPKEYPER L.L.C. and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

You must include a Registered Agent designation with your filing: the fee for the designation is \$35.00. This fee is separate from the \$250.00 filing fee you submitted, and which will be applied when your document is filed. Enclosed is a new, blank form, including a page for the Registered Agent designation.

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 (850) 487-6958.

Letter Number: 199A00046225

Lee Rivers Document Specialist



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 24, 1999

SUSAN FENICH 3425 IMPERIAL LANE LAKELAND, FL 33813

SUBJECT: SHOPKEYPER L.L.C. Ref. Number: W99000021738

Thank you for submitting your Registered Agent designation and fee. As noted in our letter of September 21st, your name is unavailable for use in Florida. With that letter we returned your original application in order for you to select a new name. Please return your corrected original and we will change the name on the Agent designation, which we are holding in our office.

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 (850) 487-6958.

Lee Rivers Document Specialist

Letter Number: 399A00046771

Sept 28,1999 Div. of Corporations P.O. Boy 6327 Tallahassee, Fl. 32314 To whom it may Concenn: Enclosed please Find documents necessary to file for a limited hability Company I his is the second time we have filed because the original name we submitted Which was shopkeyper) was already taken. Unfortunately the Certificate of Designation of Registered Agentwas sent seperately. You have the original filing Fee of 25000 but I do not know it you have or have kept. the 3500 Fee. Please contact me it necessary at (9446449494) 3425 Imperial Ln. Lakeland, Fl. 33813. Thank you, Susan Fenich ALA STATE OF THE S



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 29, 1999

SUSAN FENICH 3425 IMPERIAL LANE LAKELAND, FL 33813

SUBJECT: SHOPKEYPER L.L.C. Ref. Number: W99000021738

We have received your document for SHOPKEYPER L.L.C. and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please read this letter carefully. On September 21 we returned your application because the name you have chosen is NOT AVAILABLE. We returned your original, along with a blank form, asking you to pick a different name as well as to submit the \$35 and page for the Registered Agent. On September 24 we sent another letter reminding you that the name was unavailable and that you still needed to return your corrected original application.

Today we recieved the payment and form for the Registered Agent, still under the unavailable name. You must choose a different name under which to file. Enclosed is another blank application, along with copies of what you have submitted so far and copies of our previous letters. Please choose a different name and complete the attached form showing the new name. You may wish to call me at the number below to check any name you wish to use. Please return the completed form TO MY ATTENTION, with a copy of this letter. Thank you.

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 (850) 487-6958.

Lee Rivers Document Specialist

Letter Number: 999A00047432

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

ARTICLE I - Name:
The name of the Limited Liability Company is
Shopkeyper On the Lane L.L.C.

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

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

601 6th St. S.W., Winter Haven, Fl. 33880

**ARTICLE III - Duration:** 

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

Perpetual

99 SEP 16 PH 2:51
SECNETARY OF STATE
TALLAHASSEE FLORIE

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:

Joan B. Whitehead 900 N. Lk. Eloise, Winter Haven F. 33884

Susan L.B. Fenich 3425 Imperial Ln., Lakeland Fl. 33813

#### **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:

Any additional members which the company may choose to admit will be subject to a payment of no less than \$5,0000, and voting rights will be limited.

#### **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:

Upon the death of Joan B. Whitehead or Susan L.B. Fenich-the remaining partner would inherit said company.

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of Shopker personate 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

3) if any, the agreed value of property other than cash contributed by member(s) is

(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

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.)

Susan L.B. Fenich

Filing Fee: \$250.00 for Articles and Affidavit

### 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: Shopkeyper on the Lane L.L.C.

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

Joan B. Whitehead P. R. NAME

Florida street address (P. O. Box NOT ACCEPTABLE)

Winter Ham El. 33004

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.

Filing Fee: \$ 35 for Designation of Registered Agent