

L00000005821

SCOTT F. NELSON, P.A.

CERTIFIED PUBLIC ACCOUNTANT
200 SOUTH HOOVER BOULEVARD, BUILDING 201
SUITE 140
TAMPA, FLORIDA 33609
813-286-7946 FAX 813-639-1142

April 27, 2000

Registration Section
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

200003234022-4
-05/01/00--01154--020
***285.00 ***160.00

RE: Samorajczyk Regulatory Consultants, L.L.C.

To Whom It May Concern:

Enclosed please find the original and one copy of the Articles of Organization and Affidavit, together with a check in the amount of \$285.00. This check represents the cost of the filing fees.

Respectfully,

FILED
00 MAY 22 AM 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name	Scott F. Nelson
Availability	Certified Public Accountant
Document Examiner	
Updater	
Updater Verifier	
Acknowledgement	DCC
W. P. Verifier	DCC

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① affidavit

5 pages
W000000012160



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 9, 2000

SCOTT F. NELSON, P.A.
200 SOUTH HOOVER BOULEVARD BUILDING 201
SUITE 140
TAMPA, FL 33609

SUBJECT: SAMORAJCZYK REGULATORY CONSULTANTS, L.L.C.
Ref. Number: W00000012160

We have received your document for SAMORAJCZYK REGULATORY CONSULTANTS, 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):

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to 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) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 800A00025802

ARTICLES OF ORGANIZATION
of
SAMORAJCZYK REGULATORY CONSULTANTS L.L.C.

ARTICLE I – Name:

The name of the Limited Liability Company is:

SAMORAJCZYK REGULATORY CONSULTANTS L.L.C.

ARTICLE II – Address:

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

**5414 LEILANI
ST. PETE BEACH, FL 33706**

ARTICLE III – Duration:

The period of duration for the Limited Liability Company shall be perpetual unless dissolved under Florida law.

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:

**JOHN S. SAMORAJCZYK
5414 LEILANI
ST. PETE BEACH, FL 33706**

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:

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TALLAHASSEE, FLORIDA


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:

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TALLAHASSEE, FLORIDA

 CPA

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.)

SCOTT F. NELSON
Typed or printed name of signee

**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:**

SAMORAJCZYK REGULATORY CONSULTANTS LLC

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

**SCOTT F. NELSON
200 S. HOOVER BLVD., #201-140
TAMPA, FL 33609**

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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.



SIGNATURE