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## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJE	ECT: ALLEN PERKINS,	LIC
	(Name of Limited Liability Company)	E A
The enc	closed Articles of Organization and fee(s) are submitted for filing.	B21
Please r	return all correspondence concerning this matter to the following:	The state of the s
	ALLEN PERKINS (Name of Person)	OR STATE
_	ALLEN PERKINS,	LLC
	(Firm/Company)	
_	2315 N. WELLES	LEY DR.
_	BRADENTON, FL 3	34207
	(City/State and Zip Code)	
For furt	ther information concerning this matter, please call:	
AU	<del></del>	2-7206 ne Telephone Number)
	(ratio of roson) (ratio code of payan	ic receptone names;
Enclose	sed is a check for the following amount:	
□ \$125.	5.00 Filing Fee \$\sum_{\text{Certificate of Status}}\$155.00 Filing Fee \$\text{Certified Copy}\$ (additional copy is enclosed)	Certificate of Status &
· , ,	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Corporations Corporations Clifton Building Corporations Clifton Building Corporations Clifton Building Corporations Corporations Clifton Building Corporations Corporat	nter Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:
ALLEN PERKINS, LLC
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
2315 N. WELLESLEY DR. 2315 N. WELLESLEY DR. BRADENTON, FL 34207
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  ALLEN PERKINS  Name  2315 N. WELLESLEY DR.  Florida street address (P.O. Box NOT acceptable)  BRADENTON FL. 34207  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 as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

## The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) PERKINS Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV- Manager(s) or Managing Member(s):

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)