# Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : METRO BUSINESS AGENCY, INC

Account Number : I20080000101 Phone : (239)466-8600 Fax Number : (239)275-0865

\*\*Enter the email address for this business entity to be used for future

Email Address: WANGES DUESO HOTMAIL COM

# FLORIDA LIMITED LIABILITY CO. STONEBRIDGE SERVICES LLC

annual report mailings. Enter only one email address please. \*\*

Certificate of Status	
Certified Copy	
Page Count	03
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C. LEWIS

JAN 1 2011

**EXAMINER** 

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#### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: STONEBRIDGE SERVICES LLC Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: HANNA SRODA Name of Person METRO BUSINESS AGENCY INC Firm/Company 4460 CLEVELAND AVE# E Address FORT MYERS, FL 33901 City/State and Zip Code WANGLESDURSO@HOTMAIL.COM E-mail address; (to be used for future annual report notification) For further information concerning this matter, please call: WANGLES DURSO 247-7760 Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section

Registration Section
Division of Corporations
Clifton Bullding
2661 Executive Center Circle
Tallahassec, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

# STONEBRIDGE SERVICES LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### ARTICLE II - Address:

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

#### Principal Office Address:

Mailing Address:

3638 PINE OAK# 103

FORT MYERS, FL 33916-7453

3638 PINE OAK# 103

FORT MYERS, FL 33916-7453

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:

METRO BUSINESS AGENCY INC

Name

4460 CLEVELAND AVE# E

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

FORT MYERS

<sub>FL</sub> 33901

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

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

The name and address of each Manager or Managing Member is as follows:

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<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGR	WANGLES DURSO	
	3638 PINE OAK CIR# 103	<del></del>
	FORT MYERS, FL 33918	
MGR	VINICIUS CORREA	
	3638 PINE OAK CIR# 103	
	FORT MYERS, FL 33916	
	TOTAL PARTIES AND TOTAL PROPERTY OF THE PARTIES AND THE PARTIE	
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the	ne date of filing: 01/01/2011	(OPTIONAL)
(If an effective date is listed, the date must	he specific and cannot be more that	n five business days prior
to or 90 days after the date of filing.)	ne showing that entities no more and	es es : A wantemann milin ke one
m on so days and the that or ming.		

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

HANNA SRODA - METRO BUSINESS AGENCY INC

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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