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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

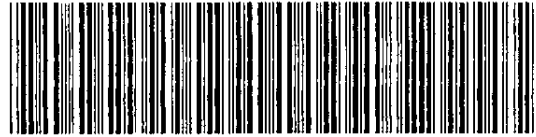
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/18/11--01023--016 \*\*155.00

Effective Date 4-4-11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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J. SAULSBERRY  
EXAMINER

FEB 25 2011

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: O'Quinn Stumphauzer, P.L.**  
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:

Ryan O'Quinn, Esq.  
Name of Person

O'Quinn Stumphauzer, P.L.  
Firm/Company

P.O. Box 144581  
Address

Coral Gables, FL 33114  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Ryan O'Quinn, Esq. at (305) 588-8023  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

O'Quinn Stumphauzer, P.L.

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

**ARTICLE II -Address:**

The principal office address shall be:

200 S. Biscayne Blvd, Suite 2790  
Miami, FL 33131.

**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:

Osborne O'Quinn, Esq.

Name

200 S. Indian River Dr., Suite 301

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

Fort Pierce FL 34950

City, State, and Zip

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*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)

**ARTICLE IV – Managing Members:**

<u>Title</u>	<u>Name and Address</u>
MGRM	Ryan Dwight O'Quinn 200 S. Biscayne Blvd, Suite 2790 Miami, FL 33131
MGRM	Ryan K. Stumphauzer 200 S. Biscayne Blvd., Suite 2790 Miami, FL 33131

**ARTICLE V – Purpose:**

The purpose of this entity is to engage in any lawful professional services business, including providing legal services.

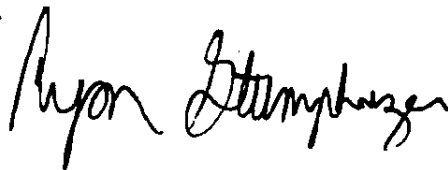
**ARTICLE VI - Effective Date:**

The effective date of this entity shall be April 4, 2011.

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**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.)

**Ryan Stumphauzer, Esq.**

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)