

L0000000 16131

MICHAEL VENTO

2051 MAIN ST. SUITE # 119
SARASOTA, FL. 34237
ATTN. CARE OF TROY FUNK

Phone 941-330-2502

December 05, 2000

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-12/11/00--01016--006
****125.00 ****125.00

To whom it may concern,
Please use to above information as my cover letter.

00 DEC 27 14 2: 29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
MICHAEL VENTO
Sincerely,
FILED

~~6000-21123~~
L00-16131
SA 12/27



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

December 12, 2000

MICHAEL VENTO
2051 MAIN ST., SUITE 119
SARASOTA, FL 34237

SUBJECT: SOUTHWEST L.L.C.
Ref. Number: W00000029123

We have received your document for SOUTHWEST L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6917.

Gretchen Harvey
Document Specialist Supervisor

Letter Number: 700A00062612

FILED
00 DEC 27 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Southwest L.L.C.

ARTICLE II - Address:

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

1906 Siesta Dr.
Sarasota, FL 34237

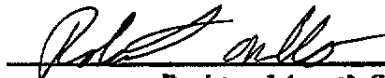
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Robert ONello
Name
1906 Siesta Dr
Florida street address (P.O. Box NOT acceptable)
Sarasota, FL 34239
City, State, and Zip

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SECRETARY OF STATE
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 as provided for in Chapter 608, F.S.



Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)


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.)

Robert ONello

Typed or printed name of signee

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)