



LO20000019-5B

ACCOUNT NO. : 072100000032

REFERENCE : 691463 81002A

AUTHORIZATION :

COST LIMIT : \$ 125.00

Patricia Pigato

ORDER DATE : August 2, 2002

ORDER TIME : 8:56 AM

ORDER NO. : 691463-005

CUSTOMER NO: 81002A

CUSTOMER: Michael S. Teal, Esq
Clayton Teal & Huddleston P.a.

114 West Rich Avenue

Deland, FL 32720

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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NAME: ABBOTT, ALDERMAN & ASSOCIATES,
LLC

EFFECTIVE DATE:

700006891517--5

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115
EXAMINER'S INITIALS:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is **ABBOTT, ALDERMAN & ASSOCIATES, LLC.**

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 1006 South Woodland Boulevard, DeLand, FL 32720.

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

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

Mark Dale Alderman
1006 South Woodland Boulevard
DeLand, FL 32720

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.



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.)

MARK DALE ALDERMAN

Typed or printed name of signee

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA