

W03000035234

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01062  
010

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W03-35234  
OK



September 10, 2003

To Whom It May Concern:

Please find enclosed a copy of my filing forms to create a Limited Liability Company in the state of Florida under the name of LVC of Tampa Bay, LLC.

We can be reached at the foregoing locations should any questions arise.

Thank you,

*Mary Louise James*  
*William J James III*

William J James III  
Mary Louise James  
LVC of Tampa Bay, LLC

[lvctampabay@verizon.net](mailto:lvctampabay@verizon.net)

727-709-2277  
813-245-1169

PO Box 2011  
Dunedin, FL 34697

FILED  
SEP 12 PM 12:56  
727-709-2277  
813-245-1169

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LVC OF TAMPA BAY, 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:

WILLIAM J. JAMES III

(Name of Person)

LVC OF TAMPA BAY, LLC

(Firm/Company)

PO BOX 2011

(Address)

DUNEDIN, FL 34697

(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM J. JAMES III

(Name of Person)

at ( 727 ) 709-2277

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED  
03-07-12 P 12:50  
TALLAHASSEE, FL

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LVC OF TAMPA BAY, 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:**

PO BOX 2011  
DUNEDIN, FL 34697

- SAME -

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

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

MARY LOUISE JAMES  
Name  
2021 PINEHURST RD  
Florida street address (P.O. Box **NOT** acceptable)  
DUNEDIN FL 34698  
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..*

Mary Louise James  
Registered Agent's Signature

(CONTINUED)

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13 SEP 11 PM 12:00

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

WILLIAM J. JAMES III  
2021 PINEHURST RD  
DUNEDIN, FL 34698

MGR

MARY LOUISE JAMES  
2021 PINEHURST RD.  
DUNEDIN, FL 34698

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

Mary Louise James  
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.)

MARY LOUISE JAMES  
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)