

L03 0000 46462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400024746704

11/19/03--01022--012 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 NOV 19 AM 9:02

FILED

11/24
[Signature]

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RUSSELL L. WILLIAMS, 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:

RUSSELL L. WILLIAMS
(Name of Person)

RUSSELL L. WILLIAMS, LLC
(Firm/Company)

7848 CENTERVILLE ROAD
(Address)

TALLAHASSEE, FL 32309
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 NOV 19 AM 9:02

FILED

For further information concerning this matter, please call:

RUSSELL L. WILLIAMS at (850) 893-6904
(Name of Person) (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

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

ARTICLE I - Name:

The name of the Limited Liability Company is: ^{^ Builders}

RUSSELL L. WILLIAMS, LLC.

ARTICLE II - Address:

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

Principal Office Address:

RUSSELL L. WILLIAMS

7848 CENTERVILLE ROAD

TALLAHASSEE, FL 32309

Mailing Address:

RUSSELL L. WILLIAMS

7848 CENTERVILLE ROAD

TALLAHASSEE FL 32309

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

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

RUSSELL L. WILLIAMS

Name

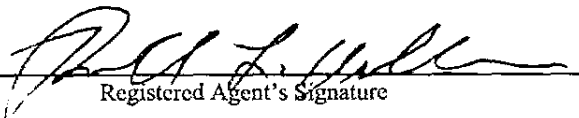
7848 CENTERVILLE ROAD

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

TALLAHASSEE FL FLORIDA 32309

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, Florida Statutes..


Registered Agent's Signature

FILED
NOV 19 AM 9:02
TALLAHASSEE, FLORIDA

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:

MGRM

RUSSELL L. WILLIAMS
7048 CENTERVILLE ROAD
TALLAHASSEE FL 32309

(Use attachment if necessary)

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

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.)

RUSSELL L. WILLIAMS

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 NOV 19 AM 9:02

FILED