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Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name

: HUBCO

Account Number : 104662003400

Phone

: (516)935-3940

Fax Number

: (516)935-3088

LIMITED LIABILITY COMPANY

Peterman-Wall Real Estate Referrals, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing:

Rublic Access Help.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Mailing Address:

ARTICLE I - Name

The name of the Limited Liability Companyis: Peterman-Wall Real Estate Referrals, LLC

ARTICLE II - Address

Principal Office Address:

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

	A A PARTY OF THE P
2425 Old Cypress Creek Road	2425 Old Cypress Creek Road
Land O'Lakes, FL 34639	Land O'Lakes, FL 34639
ARTICLE III - Registered Ager The name and Florida street address of t	nt, Registered Office & Registered Agent's Signature ne registered agent are: Vikki T. Wall
e e e e	Name
	19701 Bexley Road
	(P.O. Box or Mail Drop Box NOT Acceptable)
·	Land O'Lakes, FL 34639
	(City / State / 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.

Registered Agent's Signature - Vikki T. Wall

ARTICLE IV - Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

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Title: "MGR"=Manager "MGRM"=Managing Member	Name and Address:	
MGRM	Patricia D. Peterman - 18406 Keystone Grove Blvd., Odessa, FL 33556	
MGRM	Vikki T. Wall - 19701 Bexley Road, Land O'Lakes, FL 34639	
	The second secon	

(Use attachment if necessary)

REQUIRED SIGNATURE:

Signature of a member or 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.)

Vikki T. Wall

Typed or printed name of signee

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