

L04000015951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

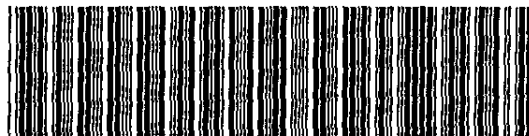
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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2004 MAR -1 AM 9:55  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN MAR 12 2004

**Gabe Panepinto, E.A., CFP**

*Enrolled To Practice Before the IRS*

3901 Appletree Drive

Valrico, FL 33594

(813) 661-1040

Fax (813) 661-1040

February 13, 2004

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

RE: Noa & Associates, LLC


Gentlemen:

An original and one copy of the Articles of Organization for the five above referenced companies are enclosed. Also, enclosed is our check for Six Hundred Fifty Dollars (\$130.00) to cover the Filing Fee, Registered Agent Designation, and Certificate of Status for each company.

Please return a certified copy of each of the articles to my office at 3901 Appletree Drive, Valrico, FL 33594.

Please call me if you have any questions regarding this filing at (813) 661-1040.

Sincerely,



Gabe Panepinto

Enclosures

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY

**ARTICLE I – Name:**

The name of the Limited Liability Company is: Noa & Associates, LLC

**ARTICLE II – Address:**

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

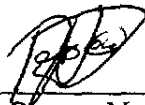
3303 W. Paris Street  
Tampa, FL 33614

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

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

Ramon Noa  
3303 W. Paris Street  
Tampa, FL 33614

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 related 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.



Ramon Noa  
Registered Agent's Signature



Ramon Noa, Member

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