## 105000006670

(Req	uestor's Name	)
(Add	ress)	
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	·	
(City/	/State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Busi	iness Entity Na	ime)
		7:-
(Doci	ument Number	)
Certified Copies	Certificate	es of Status
Special Instructions to Fi	iling Officer:	
W04-36703	в 1	927,535

Office Use Only

1/4/05



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09/30/04--01019--026 \*\*100.00

01/18/05--01008--019 \*\*25.00



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 6, 2004

RICHARD A. SPOHN 11064 108TH AVE N. LARGO, FL 33778

SUBJECT: RICHARD A. SPOHN LLC

Ref. Number: W04000036703

We have received your document for RICHARD A. SPOHN LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a fee of \$25.00 due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick Document Specialist

Letter Number: 604A00057

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: RICHARD A SPOHN 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:
RICHARD A. SPOHN (Name of Person)
REHARD A SPOHN LLC (Firm/Company)
11064 10874 AVE N.
LARGO FL 33778  (City/State and Zip Code)
For further information concerning this matter, please call:
LANNIE GREGOLY CPA at 727 785-3545  (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:	
RICHARD A SPOHN	LIC
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11064 108TH AVE N	11064 108TH AVEN
LARGO, FL 33778	LARGO, FL 33778
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the registered Registere	gistered agent are:  SPOHN  TH AVE N.  Box NOT acceptable)
City, State, an  Having been named as registered agent and to accept servi company at the place designated in this certificate, I hereb agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar	ice of process for the above stated limited liability  y accept the appointment as registered agent and the provisions of all statutes relating to the proper with and accept the obligations of my position as
registered agent as provided for in Ch	apter 608, Florida Statutes

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member	RICHARD A SPOHN 1100+ 1087H AVE N LARGO, FL 33778	
(Use attachment if necessary)		
NOTE: An additional article must be	e added if an effective date is requested $\frac{7}{200}$	
REQUIRED SIGNATURE:  Signature of a member or an a	authorized representative of a member.	
(In accordance with section 608	3.408(3), Florida Statutes, the execution affirmation under the penalties of perjury	

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

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

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)