

# L05000041312

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(Address)

(City/State/Zip/Phone #)

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SECURITY SERVICE  
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FILED

ADAM J. HARRIS  
1920 East 7<sup>th</sup> Avenue  
Suite B  
Tampa, Florida 33605  
(813) 248-6669

April 18, 2005

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

**Re: Adam Harris, LLC**

Dear Sir/Madam:

Enclosed for filing are the original and one copy of the Articles of Organization and Designation of Registered Agent for the above-referenced limited liability company. I have also enclosed a check in the amount of \$160.00 for the filing fee, and request that a certified copy of the Articles of Organization and a certificate of status to be returned to me in the enclosed self-addressed stamped envelope to 1920 East 7<sup>th</sup> Avenue, Tampa, Florida 33605.

Thank you for your assistance in this matter and if you have any questions, please do not hesitate to contact me at 813-248-6669.

Sincerely,

Adam J. Harris

AJH/pst  
Enclosures  
llc-cvr.ftr

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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:

Adam Harris, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

1920 East 7th Avenue

Suite B

Tampa, Florida 33605

**Mailing Address:**

1920 East 7th Avenue

Suite B

Tampa, Florida 33605

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

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

Adam J. Harris

Name

1920 East 7th Avenue, Suite B

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

Tampa, Florida 33605

FL

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..*

Registered Agent's Signature

(CONTINUED)

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**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:**

Manager

Adam J. Harris

1920 East 7th Avenue, Suite B

Tampa, Florida 33605

\_\_\_\_\_

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(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.)

Adam J. Harris

Typed or printed name of signee

**Filing Fees:**

**\$125.00 Filing Fee for Articles of Organization and Designation  
of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**

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