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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e#)
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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OF SEP 20 PM 12: 24

COVER LETTER

TO: Registration So Division of Co			
SUBJECT. Matov	rina & Robinson, Ll	LC.	
		d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Mark A. N	/latovina		
	(Name of Person)	
Matovina	& Robinson, LLC		
	(Firm/Company)	
6087 Spi	ruce Point Circle		
		(Address)	
Port Ora	nge, Florida 32°	128	
i on ora		/State and Zip Code)	
	, ,		
For further information	concerning this matter, please	call:	
Mark A. Matov		at (386) 756-35	
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Matovina & Robinson, LLC.	10
(Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6087 Spruce Point Circle, Port Orange, Florida 32128	P.O. Box 291258, Port Orange, Florida 32129
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registered address of the registration.	red Agent. You must designate an individual or another
Mark A. Matovina	
Name	
6087 Spruce Point Circle	
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Port Orange	FL 32128
City, State, ar	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity.	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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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:

<u>Title:</u> "MGR" = Mar "MGRM" = M	nager Ianaging Member	Name and Address:	
MGRM		Mark A. Matovina	
		6087 Spruce Point Circle	_
		Port Orange, Florida 32128	_ _
MGRM		Steven Randell Robinson	
		38 Ormond Green Blvd.	_
		Ormond Beach, Florida 32174	_
	···		_
			_
	·		- ,
(Use attachme	nt if necessary)		- -
CLE V: Effective date is 00 days after the	e date, if other than the listed, the date must	ne date of filing: (OPTI- be specific and cannot be more than five business	
CLE V: Effective date is 00 days after the	re date, if other than the listed, the date must date of filing.) SIGNATURE:		
CLE V: Effective date is 00 days after the	ve date, if other than the listed, the date must date of filing.) SIGNATURE: Signature of a mem (In accordance with	ber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution estitutes an affirmation under the penalties of perjury	
CLE V: Effective date is 00 days after the	listed, the date must date of filing.) SIGNATURE: Signature of a mem (In accordance with of this document contact the facts stated Mark A. Matovin	ber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury d herein are true.)	

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)