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EFFECTIVE DATE

11/03/05

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2005 NOV 10 PM 1:59

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

NOV 16 2005

AUTHORIZATION BY PHONE TO

CORRECT eff date to be 11/03/05

DATE 11/16/05 @ 11:19 am

DOC. EXAM Cy Bry

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GLORIA JEAN FISCHER, L.L.C.  
(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:

JEAN FISCHER

(Name of Person)

GLORIA JEAN FISCHER, L.L.C.

(Firm/Company)

16894 SE 77TH NORTHDRIDGE CT.

(Address)

THE VILLAGES, FL. 32162

(City/State and Zip Code)

For further information concerning this matter, please call:

JEAN FISCHER

(Name of Person)

at ( 352 ) 361-7215

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|---|---|

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

GLORIA JEAN FISCHER, L.L.C.

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

EFFECTIVE DATE

11/03/05

### ARTICLE II - Address:

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

#### Principal Office Address:

16894 SE 77<sup>TH</sup> NORTHRIDGE CT  
THE VILLAGES  
FL. 32162

#### Mailing Address:

16894 SE 77<sup>TH</sup> NORTHRIDGE CT.  
THE VILLAGES  
FL. 32162

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JEAN FISCHER

Name

16894 SE 77<sup>TH</sup> NORTHRIDGE CT.

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

THE VILLAGES FL 32162

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.*

Jean Fischer

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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CLERK OF THE COURT  
JANUARY 10, 2006  
CORPORATIONS  
SECTION  
TALLAHASSEE, FLORIDA

**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:**

MGRM

NICK FISCHER  
16894 SE 77TH NORTHWIDGE CT.  
THE VILLAGES, FL. 32162

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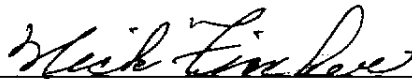
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: NOVEMBER 3, 2005 . (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

NICK FISCHER

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)