# 60000115935

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# **COVER LETTER**

TO:	Registration Se Division of Co		-				
SUBJI	ECT: Bryan,	Bradley & William					
		(Name of Limited	l Liability Co	ompany)			
The en	iclosed Articles of	f Organization and fee(s) are so	ubmitted for I	filing.			
Please	return all corresp	ondence concerning this matte	r to the follow	ving:			
	Craig A. E	3ryan					
			Name of Person	n)	, ,		
	Bryan, Br	adley & Williams,	LLC				
	(Firm/Company)						
	3003 Tamiami Trail No., STE 210						
			(Address)				
	Naples, I	FL 34103					
		(City	State and Zip	Code)			
For fu	rther information	concerning this matter, please	call:				
Crai	ig A. Bryan	ı	at ( 239	, 293-47	27		
	Craig A. Bryan (Name of Person)		at (239) 293-4727 (Area Code & Daytime Telephone Number)				
Enclo	sed is a check fo	or the following amount:					
□ \$12.	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified	00 Filing Fee & Copy copy is enclosed)	S160.00 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	Regi Divi Clift 2661	et/Courier Address stration Section sion of Corporation on Building Executive Center	ons r Circle		

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited Liability Company is:					
Bryan, Bradley & Williams, LLC					
(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:				
3003 Tamiami Trail No., STE 210	3003 Tamiami Trail No., STE 210				
Naples, FL 34103	Naples, FL 34103				
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 re-	egistered agent are:				
C.A. Bryan & Associates, Inc.					
Name					
377 Robin Hood Cir, #1	377 Robin Hood Cir, #101				
Florida street address (P.O. Box NOT acceptable)					
Naples	FL 34104				
City, State, a	nd Zip				
	accept service of process for the above stated limited				

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

OS NOV 30 AM 9: 29

# 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 MGRM Craig A. Bryan 377 Robin Hood Cir, #101 Naples, FL 34104 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 12/01/2005 (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.)

Craig A. Bryan

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)