

W6000038132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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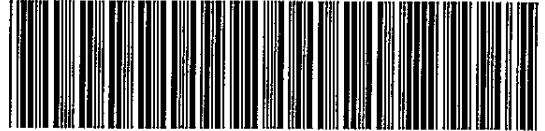
(Business Entity Name)

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CLERK OF COURTS

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W6-38132
JR

TRANSMITTAL LETTER

Date

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL. 32314

SUBJECT: SITUATED SOLUTIONS,LLC

Enclosed please find an original and one (1) copy of the Articles of Organization for the above LLC.

Also enclosed is a check for One Hundred and Twenty Five dollars (\$125.00) to cover filing fee and designation of Registered Agent.

FROM:

RICHARD CAMP, CPA, PA
Name

6817 Southpoint Pkwy., Suite 2201
Address

Jacksonville, Florida 32216
City, State, Zip

(904) 281-9924
Telephone number

2006 APR 10 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FL 32310

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name

The name of the Limited Liability Company is: **SITUATED SOLUTIONS,LLC**

ARTICLE II – Address of Principal Office:

The street address of the principal office of the Limited Liability Company is:
9255 STARPASS DRIVE, JACKSONVILLE, FL 32256

ARTICLE III – Mailing Address of Limited Liability Company:

The mailing address of the Limited Liability Company is:
9255 STARPASS DRIVE, JACKSONVILLE, FL 32256

ARTICLE IV – Registered Agent, Registered Office & Registered Agent's Signature

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

RICHARD CAMP, CPA, PA

Name

6817 SOUTHPOINT PKWY., #2201

Florida street address (P. O. Box not acceptable)

JACKSONVILLE, FL 32216

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 completed 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.

RICHARD CAMP, CPA, PA

By: 

Richard N. Camp, Authorized Signatory

Date: 4/6/06

2006 APR 10 PM 2:01
CLERK OF SUPERIOR COURT
JACKSONVILLE, FLORIDA

FILED

ARTICLE V – Management (Check box if applicable)

☐ The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager – managed company.


Signature of a member or an authorized representative of a member

Julian P. Robichaux, authorized representative

(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.)

Julian P. Robichaux

Typed or printed name of signee

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)