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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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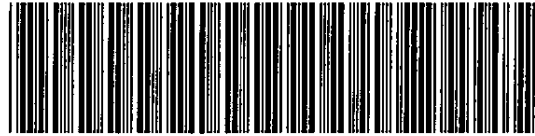
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 14 2006

DEVINE
MILLIMET

ATTORNEYS AT LAW

June 9, 2006

MARK E. TULLY

MTULLY@DEVINEMILLIMET.COM

VIA FEDERAL EXPRESS

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

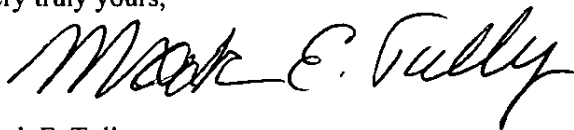
Re: Rick Segal & Associates, LLC

Dear Sir/Madam:

Enclosed please find Articles of Organization for Florida Limited Liability Company on behalf of the above-referenced LLC. Kindly file this document in your usual manner and return a date stamped copy to this office in the enclosed self-addressed, stamped envelope.

If you should have any questions regarding the enclosed, please do not hesitate to contact me.

Very truly yours,



Mark E. Tully

MET:tlm

Enclosures

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rick Segel & Associates, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

543 Davinci Pass

Poinciana, FL 34759

Mailing Address:

543 Davinci Pass

Poinciana, FL 34759

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:

Ralph Segel

Name

543 Davinci Pass

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

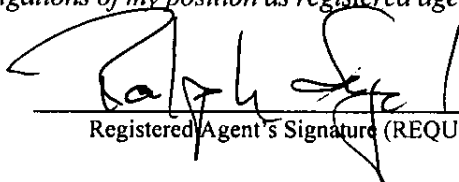
Poinciana, FL 34759

FL

City, State, and Zip

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TALLAHASSEE, FLORIDA

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)

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:

MGR

Ralph Segel

543 Davinci Pass

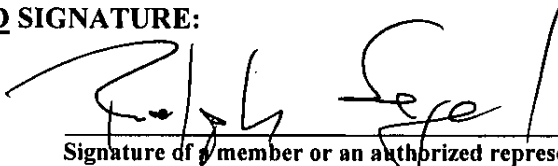
Poinciana, FL 34759

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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 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.)

Ralph Segel

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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