(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
. (Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Na	me)
(Do	ocument Number	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		811
<u> </u>	Office Use Or	



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### AFFORDABLE LEGAL CLINIC, INC.

426 E. Highway 434 • Winter Springs, Florida 32708
Post Office Box 180292 • Casselberry, Florida 32718-0292
Telephone: (407) 327-5297 • Facsimile: (407) 327-8444 • e-mail: tbinford@cfl.rr.com

August 7, 2006

Secretary of State
Division of Corporations
Post Office Box 6327
The Capitol
Tallahassee, Florida 32399-6327

Re: E PATTERSON LLC.

Division of Corporations:

Enclosed please find two copies of the Articles of Organization for Florida Limited Liability Company for a new Florida corporation now being formed – E PATTERSON LLC. Also enclosed please find our check in the amount of \$130.00. This check includes payment for the following:

Filing fee	\$125
Certificate of Status	5

TOTAL \$130.00

Please send the duplicates of the Articles of Organization to Affordable Legal Clinic The Hwy 434, Winter Springs, Florida 32708.

Your cooperation in this matter is appreciated.

Sincerely,

Thomas A. Binford

Enclosures TAB:rr

#### **COVER LETTER**

TO: Registration Division of C					
SUBJECT, E PA	TTERSON LLC				
SUBJECT:	(Name of Limite	d Liability Com	oany)		
The enclosed Articles	of Organization and fee(s) are s	ubmitted for fili	, ,		
	spondence concerning this matter		•		
ERIC G.	PATTERSON				
	(	Name of Person)			
· · · · · · · · · · · · · · · · · · ·	(	Firm/Company)			<del></del>
4744 Sv	vansneck Place				
		(Address)			
Winter 9	Sp <u>ri</u> ngs, Florida 3	32708			
		State and Zip Coo	ie)	· · · · · · · · · · · · · · · · · · ·	A.C.
For further information	n concerning this matter, please	call:			CRETARY OF STA LAHASSEE, FLOR
ERIC G. PAT	TERSON	at ( 407	, 699-00	35	무무
	ne of Person)	(Area Co		elephone Number)	STATE LORID,
Enclosed is a check	for the following amount:				
\$125.00 Filing Fe	e  \$\sqrt{3}\\$130.00 Filing Fee & Certificate of Status	\$155.00 I Certified Cop (additional copy	ру	\$160.00 Fill Certificate of S Certified Copy (additional copy in	Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 2661 Ex	Courier Addressition Section of Corporation Building Recutive Centerssee, FL 32301	ons r Circle	

06 AUG 10 AM 11:26

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is:

E PATTERSON 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	s:

Principal Office Address:	Mailing Address:
4744 Swansneck Place	4744 Swansneck Place
Winter Springs, Florida 32708	Winter Springs, Florida 32708

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:

ERIC G. PATTERSON

Name

4744 Swansneck Place
Florida street address (P.O. Box NOT acceptable)

Winter Springs, Florida 32708 FL
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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

MGRM	Eric G. Patterson	
	4744 Swansneck Place	
	Winter Springs, Florida	32708
	177	
	-	
	<del> </del>	
		<del></del>
Use attachment if necessary)		
· · · · · · · · · · · · · · · ·		
LE V: Effective date, if other than	the date of filing:	. (OPTIONA

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 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.)

ERIC G. PATTERSON

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)