

L06000089206

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

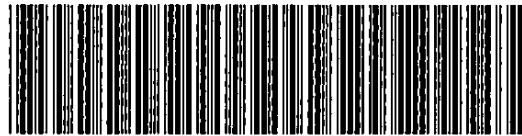
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800079272078

09/08/06--01019--025 **160.00

FILED
06 SEP -8 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BARON & MOORE, P.A.
ATTORNEYS AT LAW

MICHAEL L. MOORE

ARTHUR BARON **
FLORIDA BOARD CERTIFIED
CIVIL TRIAL LAWYER

* ALSO ADMITTED IN MICHIGAN
** OF COUNSEL

640 N. HILLSIDE AVENUE
ORLANDO, FLORIDA 32803
OFFICE: (407) 894-6447
FAX: (407) 894-0332
WWW.BARONANDMOORE.COM
PLEASE REPLY TO ORLANDO OFFICE

MICHIGAN OFFICE
1101 11TH AVENUE
SUITE 4
MENOMINEE, MI 49858
OFFICE: (906) 863-3600
FAX: (906) 863-3609

August 18, 2006

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

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Florida Math Institute, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing:

Please return all correspondence concerning this matter to the following:

Michael L. Moore, Esquire
Baron and Moore, P.A.
640 North Hillside Avenue
Orlando, Florida 32803

For further information concerning this matter please call:

Michael L. Moore, Esquire at 407-894-6447

Sincerely,


Michael L. Moore

MLM:taa
Enclosures: as stated
cc: Justus F. Frazier, Jr.
Barbara J. Frazier

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
06 SEP -8 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I – Name:

The name of the Limited Liability Company is:

THE FLORIDA MATH INSTITUTE, LLC

ARTICLE II – Address:

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

Principal Office Address

401 Shady Pine Court
Clermont, Florida 34711

Mailing Address


401 Shady Pine Court
Clermont, Florida 34711

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

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

Michael L. Moore, Esquire
640 North Hillside Avenue
Orlando, Florida 32803

Having been named as registered agent and to accept service of process for 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, Florida Statutes.


Registered Agent's Signature

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:

SEP 05 2008

MGRM

Justus F. Frazier, JR.
401 Shady Pine Court
Clermont, Florida 34711

REQUIRED SIGNATURE:

Justus F. Frazier Jr.

Signature of a member or an authorized representative of a member

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

Justus F. Frazier Jr.

Typed or printed name of signee

MGRM

Barbara J. Frazier
401 Shady Pine Court
Clermont, Florida 34711

REQUIRED SIGNATURE:

Barbara Frazier

Signature of a member or an authorized representative of a member

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

Barbara J. Frazier

Typed or printed name of signee

Filing fees enclosed

\$100.00 Filing Fee for Articles of Organization

\$25.00 Designation of Registered Agent

\$30.00 Certified Copy

\$ 5.00 Certificate of Status