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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. Ray Hill
13873 SW 112th Circle
Dunnellon, FL 34432
1-352-861-1688

October 10, 2006

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

Enclosed is our articles of organization for a Florida Limited Liability Company.
I have also enclosed a copy of the fictitious name registration from July 2006 we completed and a check for \$125.00.

Thank You



C. Ray Hill

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Allied Appraisal Group, 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:

13873 SW 112th Circle

Dunnellon, FL 34432

Mailing Address:

13873 SW 112th Circle

Dunnellon, FL 34432

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:

Lois A. Hill

Name

13873 SW 112th Circle

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

Dunnellon

FL 34432

City, State, and Zip

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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..

Lois A. Hill

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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

C. Ray Hill

13873 SW112th Circle

Dunnellon, FL 34432

MGRM

Lois A. Hill

13873 SW 112th Circle

Dunnellon, FL 34432

(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 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.)

C. RAY HILL

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)