(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
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January 17, 2007

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: Proposed Liability Company: Cynthia B. Todd, Ph.D., L.L.C.

Dear Sirs:

I am enclosing herewith an original and one (1) copy of the above LLC and Registered Designation form.

Also enclosed are the following fees:

\$100.00 - Filing Fee for Application

\$ 25.00 - Designation Resident Agent

\$ 5.00 - Certificate of Status

Please send your letter of acknowledgment to the undersigned.

Very truly yours

Frank P. Tyson, J

FPT/mj

Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CYNTHIA B. TODD, PH.D., L.L.C.

ARTICLE II - Address:

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

162 Jones Creek Drive Jupiter, Florida 33458

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

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

Cynthia B. Todd 162 Jones Creek Drive Jupiter, Florida 33458

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, Florida Statutes.

Cynthia B. Todo

ARTICLE IV - Management:

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

ARTICLE V - Effective Date:

This Limited Liability Company is formed at the time of filing.

(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.)

My Cyllu' B. Todd Eynthia B. Todd

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

CYNTHIA B. TODD, PH.D., L.L.C.

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

CYNTHIA B.TODD 162 Jones Creek Drive Jupiter, Florida 33458

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, Florida Statutes.

Cvnthia B. Todd