

L07000039320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W006-43854

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPECIALIZED SECRETARIAL SERVICES
(Name of Limited Liability Company)

of FLORIDA, LLC

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

Please return all correspondence concerning this matter to the following:

Carol Merrilee Wands
(Name of Person)

SPECIALIZED SECRETARIAL SERVICES of FLORIDA
(Firm/Company)

440 SE Sandra Drive
(Address)

Port St Lucie, FL 34983
(City/State and Zip Code)

For further information concerning this matter, please call:

Merrilee Wands
(Name of Person)

at (772 332-7272)
(Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee
☒ \$130.00 Filing Fee & Certificate of Status
☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 5, 2006

CAROL MEVVILEE WANDS
440 SE SANDIA DRIVE
PORT ST. LUCIE, FL 34983

SUBJECT: SPECIALIZED S SERVICES OF FLORIDA PSC, LLC
Ref. Number: W06000043854

We have received your document for SPECIALIZED S SERVICES OF FLORIDA PSC, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

WE CAN NOT READ THE HAND WRITING ON THE ARTICLES PLEASE TYPE OR PRINT MORE CLEARLY.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 706A00059743

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2006

CAROL MEVVILEE WANDS
440 SE SANDIA DRIVE
PORT ST. LUCIE, FL 34983

SUBJECT: SPECIALIZED S SERVICES OF FLORIDA PSC, LLC
Ref. Number: W06000043854

We have received your document for SPECIALIZED S SERVICES OF FLORIDA PSC, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Article I must only list the name to be registered.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 706A00064178

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TALLAHASSEE, FLORIDA

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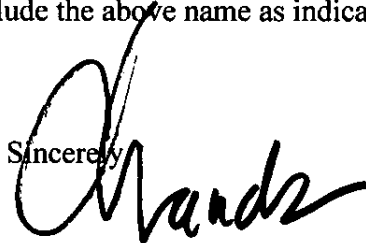
SPECIALIZED SECRETARIAL SERVICES OF FLORIDA, PSL, LLC
3419-540-0209-000/9 Occupational License, St. Lucie County, Florida
Panama City, Tampa and Port St. Lucie, Florida
1-866792-2809
www.yoursecretary.us

FLORIDA DEPT OF STATE
DIVISION OF CORPORATIONS
REGISTRATION
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

RE: SPECIALIZED SECRETARIAL SERVICES OF FLORIDA, PSL, LLC

Enclosed is your letter dated October 5, 2006, regarding your reference number:
W06000043854. Please conclude the above name as indicated above. Your reference
number: 706A00059143.

Sincerely,



Carol M. Wands

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Specialized Secretarial Services

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

OF FLORIDA, P.S.L. LLC**ARTICLE II - Address:**

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

Principal Office Address:**Mailing Address:**440 SE Sandia DrPort St Lucie, FL 34983Same**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:

Carol Merri Lee Wands

Name

440 SE Sandia Dr.Florida street address (P.O. Box **NOT** acceptable)Port St Lucie, FL 34983

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..

Wands

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

MGR

Secretary

Name and Address:

Carol M. Wands

Angela M. Wands

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TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 09/29/06 (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:

Wands

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.)

Carol M. Wands

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)