L07000072194

(Requestor's Name)
(Address)
·
(Address)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
-
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800105787738

07/11/07--01039--001 **125.00

TITOT

07 JUL 11 AMIN: 04
SECRETARY OF STATE
TALLAHASSEE, FLORID.

607x-44384

COVER LETTER

Division of Corporations
SUBJECT: AV and PC - of Tampa, LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Adriel Marie Leff (Name of Person)
AVand PC-of Tampa, LLC (Firm/Company)
26202 Green Willow Run
Wesley Chape 7 33544 (City/State and Zip Code)
For further information concerning this matter, please call:
Adriel M. Lef at (813) 416 - 1348 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, 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 Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
AV and PC - of (Must end with the words "Limited I	Tanpa LLC Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
26202 Green Willow Run Wosley Chapel Fl, 33544	26202 Green Willow Run Wesley Chapel, Fl 33544
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own I business entity with an active Florida registration.)	ered Office, & Registered Agent's Signature. Registered Agent. You must designate an individual branches.
The name and the Florida street address of the Anthony	
^ · ·	cen Willow Run
Florida stree	et address (P.O. Box <u>NOT</u> acceptable)
Wedley Cha	ate, 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)

ARTICLE IV- Manager(s) or Ma The name and address of each Man	anaging Member(s): lager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Adviel M Loff 26202 Green Willow Run Wester Chancel, Fl 33544
_MGRM	Anthony J. Loss 26207 Green Willas Rin Wedge Chapel Fl 33544
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary) ARTICLE V: Effective date, if other than to (If an effective date is listed, the date must to or 90 days after the date of filing.)	he date of filing: Toly 1 ³⁴ 2007 (OPTIONAL) t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	SECRETARIASIS TALLAHASIS
of this document con	section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury and herein are true.)

Filing Fees:

\$125,00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30,00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)

Holrie I M. Leff
Typed or printed name of signee