

L070000085390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

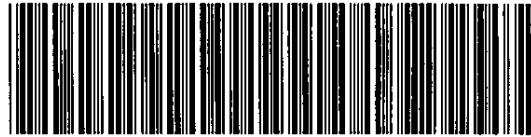
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600106898536

08/20/07--01025--017 **160.00

Effective Date

09/01/07

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 20 AM 10:50

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Pro-Rec Solutions, 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:

Mr. Tanny J. Retz

(Name of Person)

(Firm/Company)

941 NE 19TH AVE, SUITE 214

(Address)

FT. LAUDERDALE, FL 33304

(City/State and Zip Code)

For further information concerning this matter, please call:

Mr. Tanny J. Retz

(Name of Person)

at (**954**) **868 - 3449**

(Area Code & Daytime Telephone Number)

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

August 17, 2007

To Whom It May Concern:

My name is Tanny J. Retz and I have enclosed the Articles of Organization along with an attachment and a check for \$160.00.

The mailing address;
941 NE 19TH AVE
SUITE 214
FT. LAUDERDALE, FL 33304

My direct phone number;
(954) 868-3449

Thank you for your assistance,


Tanny J. Retz

Effective Date

09/01/07

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pro-Rec Solutions, LLC.

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

ARTICLE II - Address:

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

Principal Office Address:

941 NE 19TH AVE

SUITE 214

FT. LAUDERDALE, FL 33304

Mailing Address:

941 NE 19TH AVE

SUITE 214

FT. LAUDERDALE, FL 33304

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:

MR. TANNY J. RETZ

Name

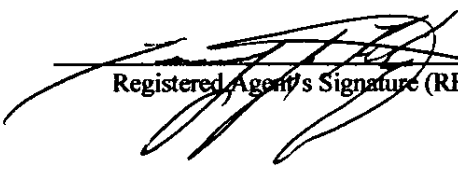
941 NE 19TH AVE, SUITE 214

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

FT. LAUDERDALE FL 33304

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 20 AM 10:51

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

MR. TANNY J. RETZ
941 NE 19TH AVE, SUITE 214
FT. LAUDERDALE, FL 33304

MGRM

MR. ERIC TAULBEE
1762 HOWLAND BLVD.
DELTONA, FL 32738

MGRM

MRS. LINDA TAULBEE
1762 HOWLAND BLVD.
DELTONA, FL 32738

MGRM

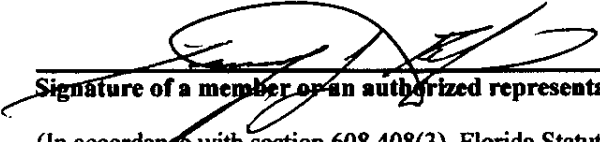
MR. MARK REED
738 HOLDEN AVE
SEBASTIAN, FL 32958

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: SEPTEMBER 1, 2007. (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.)

MR. TANNY J. RETZ

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)

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Attachment 1 of 1

ARTICLE IV-Manager(s) or Managing Member(s): - CONTINUATION -
The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

MRS. TONYA S. REED
738 HOLDEN AVE
SEBASTIAN, FL 32958

MGRM

MR. THOMAS M. HYNES
941 NE 19TH AVE.
FT. LAUDERDALE, FL 33304

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 20 AM 10:51