

LO8 000007953

The Fuller Firm

(Requestor's Name)

9436 ReGency Park Blvd

(Address)

(Address)

Port Richey, FL 34668

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

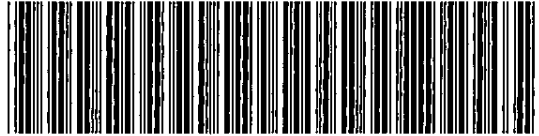
(Business Entity Name)

(Document Number)

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**T. CLINE**

JAN 23 2008

**EXAMINER**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I: NAME**

The name of the Limited Liability Company is:

ESTATE PLANNING SERVICES OF FLORIDA, LLC

**ARTICLE II: ADDRESS**

Principal Office Address:

Mailing Address:

7407 State Road 52  
Hudson, FL 34667

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Hudson, FL 34667

**ARTICLE III: REGISTERED AGENT**

Registered Agent: KEVIN A. FULLER  
Address: 7407 State Road 52  
Hudson, FL 34667

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

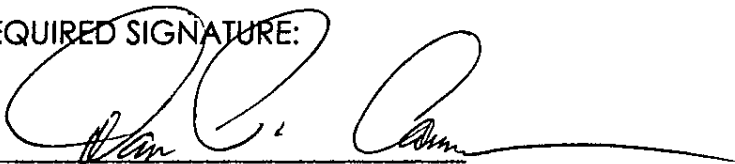
**ARTICLE IV: MANAGER(S) and/or MANAGING MEMBER(S)**

MGR	DAN P. CASSON 7407 State Road 52, Hudson, FL 34667
MGRM	LEAD MARKETING SERVICES, LLC
MGRM	LANCE INSURANCE & MARKETING SERVICES, LLC
MGRM	THE FULLER FIRM, PA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

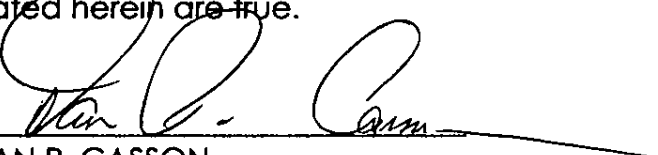
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REQUIRED SIGNATURE:



DAN P. CASSON, MGR

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.



DAN P. CASSON

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TALLAHASSEE, FLORIDA