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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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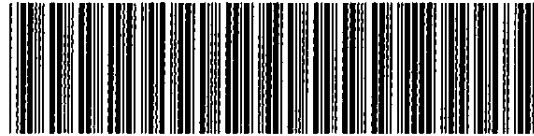
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Special Instructions to Filing Officer:

108000020819

Office Use Only

EFFECTIVE DATE 4-21-08



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04/23/08--01037--020 \*\*125.00

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08 APR 23 AM 7:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

MAY 12 2008

EXAMINER

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: SOUTH WEST FLORIDA PROTECTALL"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:

Randel Taylor

(Name of Person)

South West Florida peotect all "LLC"

(Firm/Company)

5118 Beecher st

(Address)

Lehigh Acres Florida 33971

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Randel Taylor

(Name of Person)

at ( 239 ) 980-0945

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 24, 2008

RANDEL TAYLOR  
5118 BEECHER ST  
LEHIGH ACRES, FL 33971

SUBJECT: SOUTH WEST FLORIDA PROTECT ALL "L.L.C."  
Ref. Number: W08000020819

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08 APR 23 AM 7:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for SOUTH WEST FLORIDA PROTECT ALL "L.L.C." and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 908A00024915

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SOUTH WEST FLORIDA PROTECT ALL "L.L.C."

(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:**

Randel Taylor

5118 Beecher st

Lehigh Acres FL 33971

**Mailing Address:**

Randel Taylor

5118 Beecher st

Lehigh Acres FL 33971

**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:

Randel Taylor

Name


5118 Beecher st

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

Lehigh Acres FL 33971

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

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TALLAHASSEE, FLORIDA

**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:**

Randel Taylor *MGR*

Randel Taylor  
5118 Beecher st  
Lehigh Acres FL 33971

Madlyn Salmon *MGRM*

Madlyn Salmon  
5118 Beecher st  
Lehigh Acres FL 33971

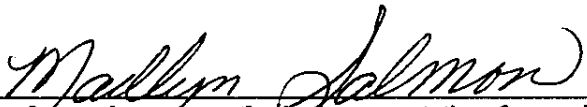
Whitney Barber *MGRM*

Whitney Barber  
5118 Beecher st  
Lehigh Acres FL 33971

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 04/21/2008. (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.)

**Sec Madlyn Salmon**

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)

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TALLAHASSEE, FLORIDA