## L080000 53499

•
(Requestor's Name)
(Address)
(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:





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8 MAY 29 AM II: 25
SECRETARY OF STATE

T. HAMPTON
MAY 3 n 2008

**EXAMINER** 

## **COVER LETTER**

	gistration Section vision of Corporations
SUBJECT:	The Bruni Team, LLC
Sebuber	(Name of Limited Liability Company)
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
	Penny A. Smith
	(Name of Person)
	H&R Block
	(Firm/Company)
	515 N. Tamiami Trail
	(Address)
	Ruskin Florida 33570
	(City/State and Zip Code)
For further i	nformation concerning this matter, please call:
Penny	y A. Smith at ( 813 ) 641-1040
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is	a check for the following amount:
_,	iling Fee \$\subseteq \subseteq \subs
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

The Bruni Team,	LLC
	J Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
906 U.S. Highway 41 North	1207 Emerald Dunes Drive
Ruskin, Florida 33570	Sun City Center, Florida 33573
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	Registered Agent. You must designate an individual or another  the registered agent are:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Penny A. Smit	Registered Agent. You must designate an individual or another  the registered agent are:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Penny A. Smit	Registered Agent. You must designate an individual or another  the registered agent are:  th  Name
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Penny A. Smit  515 N. Tamiar	Registered Agent. You must designate an individual or another  the registered agent are:  th  Name
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Penny A. Smit  515 N. Tamiar	The registered Agent. You must designate an individual or another  The registered agent are:  The Name  Mi Trail  eet address (P.O. Box NOT acceptable)
The name and the Florida street address of  Penny A. Smit  515 N. Tamiar  Florida street  Ruskin Florida	The registered Agent. You must designate an individual or another  The registered agent are:  The Name  Mi Trail  eet address (P.O. Box NOT acceptable)

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

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(OPTION ive business d
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(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.)

Signature of a member or an authorized representative of a member.

(D) (E) 1

Typed or printed name of signe

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)

FILED

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SECRETARY OF STATE