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EXAMINER



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DIVISION OF CORPORATION

COVER LETTER

TO: Registration Division of C			
_{SUBJECT:} Collir	ns & Marchese, I	LLC	
	(Name of Limite	ed Liability Company)	
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.	
Please return all corresp	pondence concerning this matt	er to the following:	
Richard	B. Collins		
<u></u>		(Name of Person)	
		(Firm/Company)	_
2804 Re	mington Green		
,, ,		(Address)	
lallahas	see, Fl 32308	//State and Zip Code)	
	(0,	, state and Esp Code,	
For further information	concerning this matter, please	call:	
Richard B. C		at (850) 671-435	57
(Namo	e of Person)	(Area Code & Daytime Telep	ohone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Sertified 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 Ci	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:				
Collins & Marchese, 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:	Mailing Address:
2804 Remington Green Cr,	2804 Remington Green Cr,
Suite # 3	Suite # 3
Tallahassee, FI 32308	Tallahassee, Fl 32308
ARTICLE III - Registered Agent, R	egistered 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:

Richard B. Collins

2804 Remington Green Cr, Suite # 3

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

Tallahassee, FI 32308

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 (REOUIRED)

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

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

MGRM	Richard B. Collins
	2804 Remington Green Cr, Suite # 3
	Tallahassee, FI 32308
	
	<u> </u>
	
Use attachment if necessary)	
•	
EV: Effective date, if other than the	he date of filing: (OPTION
days after the date of filing.)	be specific and cannot be more than five business d

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.)

Richard B. Collins

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)