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## **COVER LETTER**

Division of Corporations	
SUBJECT: Top Pro Enterprises, LLC	
	ed Liability Company)
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matt	er to the following:
Brian Savage	
	(Name of Person)
B Savvy Enterprises, Inc	
	(Firm/Company)
730 N. Old Coachman Road	Suite C6
-	(Address)
Clearwater, FL 33765	
(Cit	y/State and Zip Code)
For further information concerning this matter, please	call:
Brian Savage	at ( 707 ) 703-0579
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigsim \text{\$130.00 Filing Fee & Certificate of Status}	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy 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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limit	ed Liability Company is:
Top Pro Enterpri	ses, LLC
(Must en	d with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Addre	ss:
The mailing address ar	d street address of the principal office of the Limited Liability Company is

Principal Office Address

rincipal Office Address:	Maning Address:
730 N. Old Coochmon Rd	730 N. Old Coachman Rd
Suite C-6	Suite C6
Clearwater FL 33765	Clearwater, FL 33765

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.)

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Brian Savage

Name

730 N. Old Coachman Road Suite C6

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

Clearwater, FL 33765 FL

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)

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

. ...

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

"MGR" = M		Name and Address:	
	anager		
"MGRM" =	Managing Member		
MGRM		Brian Savage	
		730 N. Old Coachman Road Suite C6	<del> </del>
		Clearwater, FL 33765	
MGRM		Dunant \$400	
IVIGRIVI		Brent Miller 1923 Sheffield Court	
		Oldsmar, FL34677	
MGRM		Steve Ostrica	
		1763 Main Street Apt C112	
	•	Dunedin, FL 34698	
<u> </u>			
(Use attachm	ent if necessary)		
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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)