L09000005885

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u> </u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· _
0 11 1 1 1 5 0 0
Special Instructions to Filing Officer:
A
A. LUNT
JAN 1 6 2008
EXAMINED
The state of theme is all

Office Use Only



200140438952

01/15/09--01022--021 **125.00

SECREDARY OF STATE

2009 JAN 15 PH 1: 17

COVER LETTER

TO:	Registration S Division of Co				
SUBJE	_{cct:} Indep	endent Holdings l	LLC		
	<u> </u>	(Name of Limi	ted Liability Company)		
The en	closed Articles o	f Organization and fee(s) are	submitted for filing.		
Please	return all corresp	ondence concerning this ma	tter to the following:		
	Richard C	Casselberry			
			(Name of Person)		
				224	2
·			(Firm/Company)		_60 u
	P. O. Box	180595			X
			(Address)		2
	Casselbe	rry, FL 32718-059			PH
		(Ci	ty/State and Zip Code)		: 17
For fur	ther information	concerning this matter, pleas	se call:		
Rich	nard Casse	elberry	at (407) 695-0114		
	(Name	of Person)	(Area Code & Daytime Telephone Num	ber)	
Enclos	ed is a check fo	or the following amount:			
√ \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certifica (additional copy is enclosed) Certified	Filing Fee, te of Status I Copy I copy is encl	s &
		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

Independent Holdings LL	Limited Liability Company, "L.L.C.," or "LLC.")		
	Emined Elability Company. E.E.C., or EEC.)	2009	
ARTICLE II - Address:	ነገር ተመሰው ነው። የተመሰው ነው	<u>ر</u>	- National Control
The mailing address and street add	ress of the principal office of the Limited Liability C	on any	/ is:
		S	i Carrie
Principal Office Address:	Mailing Address:	O,	() (2007/2007
		70	
1201 Heien Street	P. O. Box 180595	<u> </u>	Time.

Casselberry, FL 32718-0595

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:

ARTICLE 1 - Name:

Casselberry, FL 32708

The name of the Limited Liability Company is:

Richard Casselberry
Name
1201 Helen Street
Florida street address (P.O. Box NOT acceptable)
Casselberry, FL 3270թ
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

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

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

MGRM		
INIGRINI	Richard Casselberry	
	1201 Helen Street	
	Casselberry, FL 32708	<u> </u>
		- Za 6
		ALCARE AESPET AESPET
		<u>- 855</u> - 2
Use attachment if necessary)		7 R
LE V: Effective date, if other than the d	specific and cannot be more than five	. (OPTIONA

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.)

Richard Casselberry, MGRM

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)