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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
,
Special Instructions to Filing Officer:
WM-22355

Office Use Only



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COVER LETTER

Division of C			
SUBJECT:		. KELLER , LLC	, •
	(Name of Limited	d Liability Company)	
The enclosed Articles	of Organization and fee(s) are so	ubmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
	ALFRED A	KELLER Name of Person)	
		KELLER LLC Firm/Company)	
	128 HALLSTR	SOM COURT (Address)	
	DEBARY, F	LORIDA 32713 (State and Zip Code)	
For further information	concerning this matter, please	call:	
<u>ALFRED</u>	A . KELLER	at (386) 837-1 (Area Code & Daytime Tele	112
(Nan	e of Person)	(Area Code & Daytime Tele	pnone 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 C Tallahassee, FL 32301	



May 12, 2009

ALFRED A. KELLER 128 HALLSTROM COURT DEBARY, FL 32713

SUBJECT: ALFRED A. KELLER, LLC

Ref. Number: W09000022355

We have received your document for ALFRED A. KELLER, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6967.

Letter Number: 209A00016105

Leslie Sellers Regulatory Specialist II

Division of Compositions D.O. POV 6997 Tellahorana Florida 99914

Alfred A. Keller

128 Hallstrom Court DeBary, Florida 32713 (386) 668-5922

May 19, 2009

Leslie Sellers Regulatory Specialist II Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Ms. Sellers:

Trust enclosed satisfies requirement!

Thank you,



May 29, 2009

ALFRED A. KELLER 128 HALLSTROM COURT DEBARY, FL 32713

SUBJECT: ALFRED A. KELLER, LLC

Ref. Number: W09000022355

We have received your document for ALFRED A. KELLER, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6967.

Letter Number: 109A00018188

Leslie Sellers Regulatory Specialist II 76 Spring Vista Drive DeBary, Florida 32713 386-837-7112 386-668-8665

www.aakeller.com

Al Keller - REALTOR® PRIME Real Estate, Inc



Jun 08 09 01:34p

To:	BRENDA	From		
Fax:	850-245-6030	Pages	\$:	
Phone:		Dates	June 8, 2009	·
Re:		cc:		· · · · · · · · · · · · · · · · · · ·
🛚 Urger	nt 🗆 For Review	☐ Please Comment	☐ Please Reply	☐ Please Recycle
• Comm	nents:			

As discussed over phone! Thank you very much.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Alfred A. Kelle (Must end with the words "Limited Liability	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
128 Hallstrom Court DeBary, Florida 32713	128 Hallstrom Court DeBary, Florida 32713
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the re-	
Alfred A.	Keller
Name	3. 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.
Florida street address (P.O.	
DeBary, Florida 32713 City, State, and	FL nd 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 (RECOIRED)

(CONTINUED)

Page 1 of 2

Alfred Keller

"MGR" = Manager "MGRM" = Managing Me	Name and Address:
MGR	Alfred A. Keller
	128 Hallstrom Court
	DeBary, Florida 32713
	,
	6
· //-	
(Use attachment if necessa	ary)
` LEV: Effective date, if otl	nry) ner than the date of filing: (OPTION ate must be specific and cannot be more than five business d
LE V: Effective date, if oth fective date is listed, the d days after the date of filing	ner than the date of filing: (OPTION ate must be specific and cannot be more than five business day.)
LE V: Effective date, if oth fective date, if other is listed, the d	ner than the date of filing: (OPTION ate must be specific and cannot be more than five business day.)
LE V: Effective date, if oth fective date is listed, the d days after the date of filing	ner than the date of filing: (OPTION ate must be specific and cannot be more than five business day.) RE:
LE V: Effective date, if oth fective date is listed, the d days after the date of filing REQUIRED SIGNATURES	ner than the date of filing: (OPTION ate must be specific and cannot be more than five business day.)
LE V: Effective date, if oth fective date is listed, the d days after the date of filing REQUIRED SIGNATURES Signature (In according this do filing days)	ner than the date of filing: (OPTION at at must be specific and cannot be more than five business day.) RE:
LE V: Effective date, if oth fective date is listed, the d days after the date of filing REQUIRED SIGNATURES Signature (In according this do filing days)	ner than the date of filing: (OPTION ate must be specific and cannot be more than five business dag.) RE: a of a member or an authorized representative of a member. Italiance with section 698.408(3), Florida Statutes, the execution forment constitutes an affirmation under the penalties of perjury
LE V: Effective date, if oth fective date is listed, the d days after the date of filing REQUIRED SIGNATURES Signature (In according this do filing days)	ner than the date of filing: