	(Requestor's Name)
	•
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PICK-UP	WAIT MAIL
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G. MCLEOD

JUN - 9 2009

EXAMINER



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# COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	ECT: _ Ogle Law, LLC	
		mited Liability Company
The en	closed Articles of Organization and fee(s)	are submitted for filing.
Please	return all correspondence concerning this	natter to the following:
	William H. Ogle	
		Name of Person
	Ogle Law, LLC	
		Firm/Company
	444 Seabreeze Blvd., Ste	. 750
,		Address
	Daytona Beach, FL 32118	
•		City/State and Zip Code
	wholegal@bellsouth.net	
	É-mail address: (to be us	ed for future annual report notification)
For fur	ther information concerning this matter, ple	ease call:
Bra	andi Gaffney	at( 386 ) 253-2500
	Name of Person	Area Code & Daytime Telephone Number
Enclos	ed is a check for the following amount	:
X \$125.	00 Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporation 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

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:		
Ogle Law, LLC  (Must end with the words "Limited Liability)	ty Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company i	is:
Principal Office Address:	Mailing Address:	
444 Seabreeze Blvd., Ste. 740  Daytona Beach, FL 32118	444 Seabreeze Blvd., Ste. 750 Daytona Beach, FL 32118	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the reward of the results	ered Agent. You must designate an individual or another egistered agent are:	DIVISION OF COM
444 Seabreeze Blvd., Florida street address (P.O.	· · ·	*** *** *** * *
Daytona Beach City, State, an	FL 32118	
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limite his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of a formance of my duties, and I am familiar with ana tered agent as provided for in Chapter 608, F.S	all

(CONTINUED)

Registered Agent's Signature (REQUIRED)

## 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:

"MGR" = Managing Member  MGR  William H. Ogle 444 Seabreeze Blvd., Ste. 750  Daytona Beach, FL 32118  (Use attachment if necessary)  TICLE V: Effective date, if other than the date of filing:  neffective date is listed, the date must be specific and cannot be more than five business days prior 90 days after the date of filing.)  REOURED SIGNATURE:  (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.)  William H. Ogle  Typed or printed name of signee  Filing Fees:	Title:	Name and Address:
(Use attachment if necessary)  TCLE V: Effective date, if other than the date of filing:		
(Use attachment if necessary)  TCLE V: Effective date, if other than the date of filing:	MGR	William H. Ogle
(Use attachment if necessary)  TICLE V: Effective date, if other than the date of filing:		444 Seabreeze Blvd., Ste. 750
PICLE V: Effective date, if other than the date of filing:		Daytona Beach, FL 32118
PICLE V: Effective date, if other than the date of filing:		
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PICLE V: Effective date, if other than the date of filing:		
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.)  William H. Ogle  Typed or printed name of signee	(Use attachmen	it if necessary)
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.)  William H. Ogle  Typed or printed name of signee	FIGURE V. Dor. 4'	A COMMONANT COMMONANT
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.)  William H. Ogle  Typed or printed name of signee	TCLE V: Effective	e date, if other than the date of filing: (OPTIONAL)
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.)  William H. Ogle  Typed or printed name of signee	: 90 days after the	date of filing )
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.)  William H. Ogle  Typed or printed name of signee	youngs miter the	A CONTINUES
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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.)  William H. Ogle  Typed or printed name of signee		1/1 14/12/2
(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.)  William H. Ogle  Typed or printed name of signee		1) COAC
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that the facts stated herein are true.)  William H. Ogle  Typed or printed name of signee		
William H. Ogle Typed or printed name of signee		of this document constitutes an affirmation under the penalties of perjury
Typed or printed name of signee		·
		William H. Ogle Typed or printed name of signee
	<u>Filing</u> Fee	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)