

**L09000054718**

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Todd B Smith LLC**

Certificate of Status	0
Certified Copy	0
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**S. HAWKES**

JUN 11 2009

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FAX AUDIT # H090001390883

**ARTICLES OF ORGANIZATION  
OF  
Todd B Smith LLC**

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**ARTICLE I NAME**

The name of the limited liability company shall be: **Todd B Smith LLC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be:  
7821 Reflection Cove Drive, Suite #205, Naples, Florida 33907.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Todd Smith, 7821 Reflection Cove Dr., Suite # 205, Naples, Florida 33907. Located in the County of Lee.

**ARTICLE IV DURATION**

The duration for the limited liability company shall be: Perpetual.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Todd Smith, 7821 Reflection Cove Drive, Suite # 205, Naples, Florida 33907



Date: May 26, 2009

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717

(608) 827-5300

FAX AUDIT # H090001390883

FAX AUDIT # H090001390883CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Todd B Smith LLC**

The name and address of the registered agent and office is Todd Smith, 7821 Reflection Cove Dr. Suite # 205, Naples, Florida 33907. Located in the County of Lee.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: \_\_\_\_\_

Todd Smith

Date: \_\_\_\_\_

6/8/2009

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