

L09000081824

Robin M<sup>c</sup>Callister

(Requestor's Name)

2013 E. Randolph Circle

(Address)

(Address)

Tallahassee, FL 32308

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

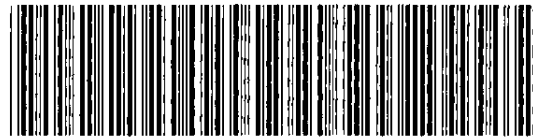
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900159841579

08/25/09--01013--029 \*\*130.00

RECEIVED  
09 AUG 25 PM 12:44  
FILED  
09 AUG 25 PM 12:48  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

AUG 25 2009

EXAMINER

**FILED**

09 AUG 25 PM 12:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**

**LELAND & MCCALLISTER, LLC**

**A LIMITED LIABILITY COMPANY**

(Pursuant to Chapter 608, Florida Statutes)

1. **Name.** The name of the limited liability company is LELAND & MCCALLISTER, LLC.

2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.

3. **Address of Principal Office.** The street address of the principal office of the limited liability company is:

1235 Miccosukee Road, Tallahassee, FL 32308

4. **Mailing Address.** The mailing address of the limited liability company is:

2013 E. Randolph Circle, Tallahassee, FL 32308

5. **Management.** The limited liability company is to be managed by one or more members and is, therefore, a member-managed company.

6. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida street address of the registered agent is:

Robin McCallister  
Leland & McCallister, LLC.  
2013 E Randolph Circle  
Tallahassee, FL 32308

*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.*

*Robin McCallister*

Robin McCallister

7. **Effective Date.** The effective date of the limited liability company shall be the date of filing unless otherwise stated below:

*Robin McCallister, PhD*

Robin McCallister

Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)

**FILED**  
09 AUG 25 PM 12:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA