

L09000090270

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Christopher Broome

AUTHORIZATION BY PHONE TO

CORRECT OK to change eff. date.

DATE 09/18/09 @ 9:05 am

DOC. EXAM



300160708383

09/16/09--01008--016 **130.00

Effective Date 09/09/09

FILED

09 SEP 17 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W09-41744
SEP 17 2009

J. BRYAN

SEP 18 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 17, 2009

CHRISTOPHER E. BROOME
THE BROOME LAW FIRM, P.A.
915 S. WASHINGTON AVENUE
TITUSVILLE, FL 32780

SUBJECT: PREFERRED LEASING, LLC
Ref. Number: W09000041744

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PREFERRED LEASING, 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):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on September 16, 2009. Please amend your document accordingly.

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 709A00030628

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Preferred Leasing, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher E. Broome, Esquire
Name of Person

The Broome Law Firm, P.A.
Firm/Company

915 S. Washington Avenue
Address

Titusville FL 32780
City/State and Zip Code

ceb@cfl.rr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher E. Broome at (**321**) **269-5620, Ext. 6**
Name of Person Area Code & Daytime Telephone 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 Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Preferred Leasing, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3030 Cuyler Street

Mims FL 32754

Mailing Address:

3030 Cuyler Street

Mims FL 32754

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:

Effective Date 09/09/09

Donald K. Robinson

Name

3030 Cuyler Street

Florida street address (P.O. Box **NOT** acceptable)

Mims FL 32754

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..

Donald K. Robinson

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Donald K. Robinson

3030 Cuyler Street

Mims FL 32754

MGRM

Diane T. Robinson

3030 Cuyler Street

Mims FL 32754

MGRM

William P. Wallis, Jr.

3030 Cuyler Street

Mims FL 32754

MGRM

Joyce T. Wallis

3030 Cuyler Street

Mims FL 32754

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: September 9, 2009 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after 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.)

DONALD K. ROBINSON

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)

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TALLAHASSEE, FLORIDA