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SEURETARY OF STATE TALLAHASSEE, FLORIDA

2009 OCT 22 AM II: 4

M. THOMAS

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EXAMINER

TURNAROUND ADVISORS, LLC

1707 Stetson Court, Longwood, Fl 32779

(352) 409-0962

October 15, 2009

Registration Section Division of Corporations P O Box 6327 Tallahassee, FI 32314

Gentlemen:

Please accept the attached "Articles of Organization" for processing of a newly formed LLC called, Turnaround Advisors, LLC.

Please contact me at the number above if there are further questions or information needed.

Also enclosed is a check for \$125.00 for the filing fee for this company.

Singerely

George H. Bannon

Manager

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TURNPY	ROUND HOVISORS, LLC ne of Limited Liability Company
The enclosed Articles of Organization and	I fee(s) are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
	GEORGE H. BANNON
Turna	П
170	7 STETSON COURT
	Address
Lo	WGWOOD, FLORUDA 32779 City/State and Zip Code
GRANN	on e cfl. rr, com
E-mail address:	
For further information concerning this ma	atter, please call:
GEORGE BANNON Name of Person	1 at 352 409-0962 55 75
Enclosed is a check for the following a	atter, please call: at (352) 409-0962 SR Area Code & Daytime Telephone Number FEOR AREA SR amount:
\$125.00 Filing Fee \$130.00 Filin Certificate of	g Fee & \$\int_\$155.00 Filing Fee & \$\int_\$160.00 Filing Fee,
Mailing Address Registration Sectoristics of Corp.O. Box 6327 Tallahassee, FL	rtion Registration Section porations Division of Corporations Clifton Building

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
(Must end with the words "Limited Liabili	Honsons LLC ty Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1707 STETSON CT.	1707 STETSON CT
LONGWOOD, FL 32779	LONGWOD, FL 327-79
Florida street address (P.O.) Florida street address (P.O.) City, State, an Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity.	egistered agent are: PENTIS ACCEPTAGE Box NOT acceptable) FL 32979 d Zip ccept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all
accept the obligations of my position as regist	formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S
(1×1)	

August Bunden

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

Title:	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member	GEORGE H. BANNON (707 STRT SOW CT.	
	LONGWOD, FL 32779	
		
		
(Use attachment if necessary)		
RTICLE V: Effective date, if other than the		
an effective date is listed, the date must l or 90 days after the date of filing.)	be specific and cannot be more than five business days prior	
REQUIRED SIGNATURE:	San	
Signature of a memb	per or an authorized representative of a member.	
(In accordance with so of this document con that the facts stated he	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)	
	GEORGE H. BANNON	
Filing Fees:	yped or printed name of signee	

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)