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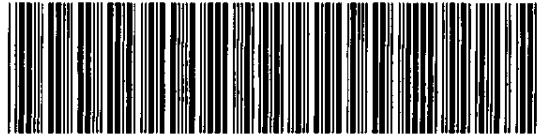
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

NOV 9 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LAY, NORMAN, McCONNELL AND URSITTI, 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:

WILLIAM LAY

Name of Person

LAY, NORMAN, McCONNELL AND URSITTI, LLC

Firm/Company

1223 WHITE STREET

Address

KEY WEST, FL 33040

City/State and Zip Code

Bill@gatsbysfl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM LAY

Name of Person

at (305) 619-9958

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

<input type="checkbox"/> \$125.00 Filing Fee	<input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input checked="" type="checkbox"/> \$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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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION OF
LAY, NORMAN, McCONNELL AND URSITTI, LLC**

The undersigned, acting as organizer of a Limited Liability Company and being authorized to execute and file these Articles of Organization pursuant to the provisions of Chapter 608, Florida Statutes, hereby certifies and adopts the following:

ARTICLE ONE: NAME

The name of the Limited Liability Company is LAY, NORMAN, McCONNELL AND URSITTI, LLC.

ARTICLE TWO: PRINCIPAL ADDRESS AND MAILING ADDRESS

The street address and zip code of the Limited Liability Company's initial executive registered office and mailing address is:

1223 White Street
Key West, FL 33040

ARTICLE THREE: REGISTERED AGENT

The name and address of the initial Registered Agent of the Limited Liability Company is:

William Lay
1223 White Street
Key West, FL 33040

ARTICLE FOUR: ORGANIZER AND MANAGING MEMBER

The Name and address of the organizer AND Managing Member of the Limited Liability Company is:

William Lay
1223 White Street
Key West, FL 33040

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ARTICLE FIVE: DURATION

The duration for the Limited Liability Company shall be perpetual until dissolved according to law.

ARTICLE SIX: MEMBER MANAGED

The Limited Liability Company shall be managed by the members, and the names and addresses of the members are:

	<u>Name</u>	<u>Address</u>
1.	William Lay	1223 White Street, Key West, FL 33040
2.	Nick Norman	1420 Von Phister Street, Key West, FL 33040
3.	Michael Shaunessy McConnell	10511 Barnstable Ct., Spring, TX 77379
4.	Dominic Ursitti	617 Mickens Lane, Key West, FL 33040

ARTICLE SEVEN: PURPOSE AND POWERS

The Limited Liability Company is formed for the purpose of engaging in any lawful business for which limited liability companies may be organized under the laws of the State of Florida, and may exercise all powers, rights and privileges conferred on limited liability companies pursuant to the laws of the State of Florida.

IN WITNESS WHEREOF, these Articles of Organization have been executed on this 2 day of November 2009, by the undersigned organizer of the Limited Liability Company.

By: 
William Lay
Managing Member and Organizer

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**CERTIFICATE OF DESIGNATION AND ACCEPTANCE
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415, Florida Statutes, the following limited liability company, organizing pursuant to the laws of the State of Florida, submits this statement for the purpose of designating its registered office and registered agent in the State of Florida and evidencing the registered agent's acceptance of that position.

NAME OF LIMITED LIABILITY COMPANY: LAY, NORMAN, McCONNELL AND URSITTI, LLC

NAME AND ADDRESS OF THE
REGISTERED AGENT AND OFFICE:

William Lay
1223 White Street
Key West, FL 33040

LAY, NORMAN, McCONNELL AND URSITTI, LLC

By 
William Lay, Member

Date: 11/2/09

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TALLAHASSEE, FLORIDA

Having been named as the Registered Agent and agreeing to accept Service of Process for the above-stated Limited Liability Company, at the place designated in this Certificate of Designation and Acceptance, I hereby state that I am familiar with, and accept, the obligations of that position as provided for in Chapter 608, Florida Statutes. I further agree to comply with the provision of all statutes relating to the proper and complete performance of my duties as Registered Agent.


William Lay
Registered Agent

Date: 11/2/09