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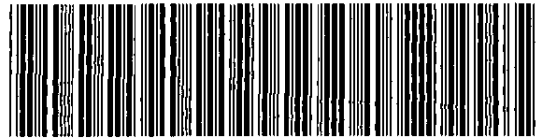
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

S. HAWKES

FEB 2 2010

EXAMINER

## **COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: C. RYAN VIOLETTE ESQUIRE, LLC.

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

Please return all correspondence concerning this manner to the following:

Name - Christopher Ryan Violette

Company - C. Ryan Violette Esquire, LLC.

Address - PO Box 52053  
Sarasota, Florida 34232

Email - [c.violette@hotmail.com](mailto:c.violette@hotmail.com)

For further information concerning this matter, please call:

Christopher Ryan Violette at (941) 266-6092.

Enclosed is a check for \$130.00 due for Filing Fee and Certificate of Status.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

C. Ryan Violette Esquire, LLC.

### ARTICLE II - Address:

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

#### Principle Office

Christopher Ryan Violette  
2159 Cork Oak Street  
Sarasota, Florida 34232

#### Mailing Address

C. Ryan Violette Esquire, LLC.  
PO Box 52053  
Sarasota, Florida 34232

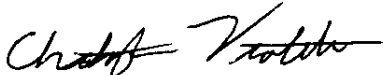
### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

Christopher Ryan Violette  
2159 Cork Oak Street  
Sarasota, Florida 34232

*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..*



Registered Agent's Signature (REQUIRED)

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(CONTINUED)

**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**

1) MGR

Christopher Ryan Violette  
2159 Cork Oak Street  
Sarasota, Florida 34232

**ARTICLE IV - Effective date:**

Effective upon 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.)

**Christopher Ryan Violette**

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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