

L10000013113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

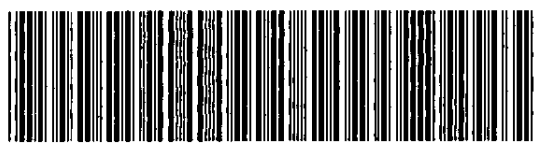
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100166253021

02/03/10--01011--002 **125.00

T. CLINE

FEB - 4 2010

EXAMINER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 FEB - 3 AM 11:13

2010 FEB 3 11:13

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Renee' Holbrook, CPA, 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:

Renee' Holbrook

Name of Person

Renee' Holbrook, CPA, LLC

Firm/Company

PO Box 141105

Address

Orlando, FL 32814-1105

City/State and Zip Code

rholbrookcpa@cfl.rr.com

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

For further information concerning this matter, please call:

Renee' Holbrook

Name of Person

at (407)

733-6192
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

2010 FEB -3 AM 11:13
 SECRETARY OF STATE
 TALLAHASSEE, FL
 901 N. G. ST.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Renee' Holbrook, CPA, 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:

Mailing Address:

1871 Oak Lane
Orlando, FL 32803

PO Box 141105
Orlando, FL 32814-1105

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:

David Holbrook

Name

2699 Lee Road, #480

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

Winter Park FL 32789

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.

[Handwritten Signature]

Registered Agent's Signature (REQUIRED)

2013
JAN 13
STATE OF FLORIDA
TALLAHASSEE

(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:

MGRM

Renee' Holbrook

1871 Oak Lane

Orlando, FL 32803

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1.31.2010 (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:

Renee Holbrook
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.)

Renee Holbrook
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)

2010 FEB -3 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

51161