## L1000017186

(Requestor's Name)
(Address)
( am )
(Address)
(City/State/Zip/Phone #)
(Olly) States Elps, Hollow,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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B. KOHR

FEB 1 6 2010

**EXAMINER** 

## **COVER LETTER**

SUBJECT:	PAC	Southeast, LLC.	
SUBJECT:		ed Liability Company	
The enclosed Article	s of Organization and fee(s) are	submitted for filing.	<u>.</u>
Please return all corr	espondence concerning this mat	ter to the following:	10 FEB 15 AM
	Ja	ames V. Stiger	5
		Name of Person	呈
	PAC	Southeast, LLC.	
		Firm/Company	•
	3410	Fralee Court, #202	
		Address	
<del> </del>		prings, Florida 34134	<u> </u>
		y/State and Zip Code	
<del></del>		theast@earthlink.net for future annual report notifier	
For further informati	on concerning this matter, pleas	e call:	
	Jim Stiger	at ( 239 )	498-1399
Na	me of Person	Area Code & Daytir	ne Telephone Number
Enclosed is a chec	k for the following amount:		
\$125.00 Filing Fe	e \$\sqrt{\$130.00}\$ Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Ad Registration Section Division of Corporation Building 2661 Executive Courier Tallahassee, FL 3	on  orations  Center Circle



The name of the Li	imited Liability Company is:	ب <i>ې</i> ن ن
	PAC Southeas	st, LLC.
(MI	ist end with the words. Ellinted Liabin	ty Company, E.E.C., or EEC.
ARTICLE II - Ad The mailing address		ncipal office of the Limited Liability Company is
Principal Office A	Address:	Mailing Address:
3410 Tralee Cou Bonita Springs, F	•	3410 Tralee Court, #202 Bonita Springs, FL 34134
(The Limited Liability Cobusiness entity with an		Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the		
	James V.	Stiger
	Name	
	3410 Tralee C	ourt, #202
	Florida street address (P.O.	Box NOT acceptable)
	Bonita Springs, FL 34134	1 FL
	City State ar	

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 agent provided for in Chapter 608, F.S..

Rogistered Agent's Signature (REQUIRED)

Page 1 of 2 (CONTINUED)

MGRM		James V. Stiger
	<del></del>	3410 Tralee Court. #202
		Bonita Springs, FL 34134
		· -
<del></del>	<del></del>	
	,	
	<del>*************************************</del>	
	<del></del>	-
(Use attachment	• /	e date of filing: . (OPTIONA
LE V: Effective fective date is lis days after the d	date, if other than the sted, the date must b late of filing.)	e date of filing: (OPTIONAle specific and cannot be more than five business day
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LE V: Effective fective date is lis days after the d	date, if other than the sted, the date must be late of filing.)  GNATURE:  Signature of a member	e specific and cannot be more than five business day
LE V: Effective fective date is lis days after the d	date, if other than the sted, the date must be late of filing.)  GNATURE:  Signature of a member (In accordance with se	er or an authorized representative of a member.
LE V: Effective fective date is lis days after the d	date, if other than the sted, the date must hate of filing.)  GNATURE:  Signature of a member of this document cons	er or an authorized representative of a member.  action 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury arein are true.)
LE V: Effective fective date is lis days after the d	date, if other than the sted, the date must be late of filing.)  GNATURE:  Signature of a member of this document constitute the facts stated he	er or an authorized representative of a member.
LE V: Effective fective date is list days after the d	date, if other than the sted, the date must be late of filing.)  GNATURE:  Signature of a member of this document constitution that the facts stated he	er or an authorized representative of a member.  action 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury arein are true.)  James V. Stiger

\$ 5.00 Certificate of Status (Optional)