

L10000036459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

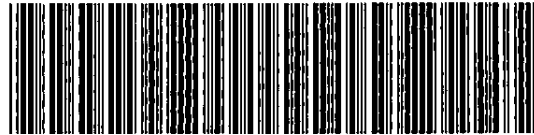
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/02/10--01048--014 **130.00

FILED
10 APR -2 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

APR -5 2009

EXAMINER

ROBERT P. VOGEL

Florida Department of State
Registration Section
Divisions of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Filing for Process + Filtration Products, LLC

To whom it may concern

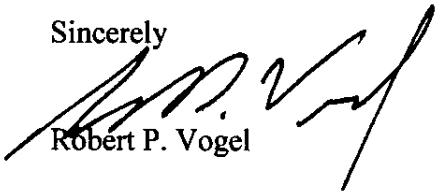
Please find enclosed the Cover Letter , Article of Organization for Florida LLC, and a check for \$130.00 drawn on the account of Robert P Vogel and Nancy E. Vogel.

I can be reached at

1202 SW Lighthouse Dr.
Palm City, FL 34990

Mobil # 772.215.8087

Sincerely


Robert P. Vogel

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Process + Filtration Products, 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:

Robert P. Vogel

Name of Person

Process + Filtration Products

Firm/Company

1202 SW Lighthouse Dr.

Address

Palm City, Florida 34990

City/State and Zip Code

BV0820@Yahoo.com

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

For further information concerning this matter, please call:

Nels Swanson, CPA

Name of Person

at (330)

336-9296

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

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Process + Filtration Products, 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:

1202 SW Lighthouse Dr.

same

Palm City, FL 34990

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:

Robert P. Vogel

Name

1202 SW Lighthouse Dr.

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

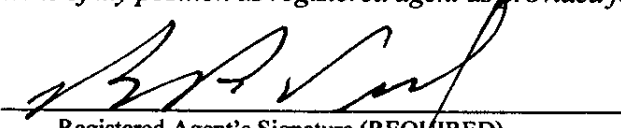
Palm City, FL 34990

FL

City, State, and Zip

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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)

(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:

Managing Member

MGRM RM

Robert P. Vogel

1202 SW Lighthouse Dr.

Palm City, Florida 34990

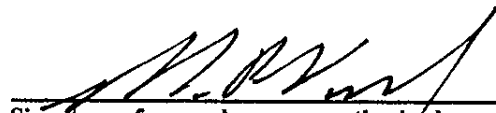
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(Use attachment if necessary)

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



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.)

Robert P. Vogel

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)