L11000042059

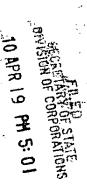
(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:
Ţ

Office Use Only



900176075829

04/19/10--01012--018 **125.00



B. KOHR

APR 2 1 2010

EXAMINER

COVER LETTER

Division of Co			
SUBJECT: Andrey	w D. Eisele, LLC		
		ed Liability Company	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return all corresp	pondence concerning this mat	ter to the following:	
Andrew Eis	ele		10 APR 19 PM 5: 01
		Name of Person	PP R
Andrew D.	Eisele, LLC		9 0
		Firm/Company	3
216 Woods	hire Lane		9 Con Si Oi
		Address	
Naples, FL			
		y/State and Zip Code	
adeisele@g		for future annual report notification)	
For further information	concerning this matter, please	e call:	
Andrew Eisele		at (239) 776-6351	
	of Person	at (<u>239</u>) <u>776-6351</u> Area Code & Daytime Telep	phone Number
Enclosed is a check f	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee &	□\$155.00 Filing Fee & □	\$160.00 Filing Fee,
Carlos Phing Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Address	
	Registration Section Division of Corporations	Registration Section Division of Corporations	
	P.O. Box 6327	Clifton Building	irola

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: Andrew D. Eisele, 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:** 216 Woodshire Lane 216 Woodshire Lane Naples, FL 34105 Naples, FL 34105 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: Andrew Eisele Name 216 Woodshire Lane Florida street address (P.O. Box NOT acceptable) Naples, FL 34105 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..

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Andrew D. Eisele
	216 Woodshire Lane
	Naples, Florida 34105
	
	·
(Use attachment if necessary)	
CLE V: Effective date, if other tha	in the date of filing: (OPTIONAL)
effective date is listed, the date m 90 days after the date of filing.)	ust be specific and cannot be more than five business days p
,	
REQUIRED SIGNATURE:	
G	Penda D Fiel
Signature of a n	nember or an authorized representative of a member.
	rith section 608.408(3), Florida Statutes, the execution

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

of this document constitutes an affirmation under the penalties of perjury

Andrew D. Eisele
Typed or printed name of signee