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(Requestor's Name)
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(City/Chah-17in/Chan-4)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Contilled Courses Contilled Course
Certified Copies Certificates of Status
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D. BRUCE

MAY 10 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJI	ECT: CAPITO	L MEDICAL SUPPLY, I			
		Name of Limite	d Liability Company		
The en	closed Articles of	f Organization and fee(s) are s	submitted for filing.		
Please	return all corresp	ondence concerning this matt	er to the following:		
	Richard K. Du	ıtter			
			Name of Person		
	Dutter Realty	Acquisitions, Inc.		_	
			Firm/Company		
	2500 NE Coa	chman Road		<u> </u>	<u>ۃ</u>
			Address	3.13	<u> </u>
	Clearwater, F	lorida 33765		会議	(- 7
		City	y/State and Zip Code	m-<	
	RichDutter@g	mail.com		70	
		E-mail address: (to be used f	or future annual report notification)	120 120 120	*- **-
For fu	rther information	concerning this matter, please	call:	S.M.	ത
Richa	ard K. Dutter		at (727)410 - 4800		
	Name	of Person	Area Code & Daytime Telephone Numb	per	
Enclo	sed is a check for	or the following amount:			
□ \$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Statu	ıs &
		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		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	/ is:
CAPITOL MEDICAL SUPPLY, LLC	
(Must end with the words "Limited L	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of th	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2500 NE Coachman Road	2500 NE Coachman Road
Clearwater, Florida 33765	Clearwater, Florida 33765
(The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.) The name and the Florida street address of t Richard K. Dutter N 2441 Saddlewood Land	lame PROPERTY OF STATE OF STAT
	•
Palm Harbor Cit	ry, State, and Zip
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all te performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

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 M	1ember		
MGR	Charles R. Brenny		
	12532 Twin Branch Acres Road		
	Tampa, Florida 33626-4425		
MGR	Richard K. Dutter		
	2441 Saddlewood Lane		
	Palm Harbor, Florida 34685	طميو	
MGRM	によっている。 には、	TO HA	- designation
	12532 Twin Branch Acres Road		- 1
	Tampa, Florida 33626-4425	-7	5
		70	İT
MGRM	Dutter Realty Acquisitions, Inc.		h
	2441 Saddlewood Lane	Ö	£
	Palm Harbor, Florida 34685	e T	
	other than the date of filing: (OPTION date must be specific and cannot be more than five business d		rior
REQUIRED SIGNATU	JRE: As PRE Ire of a member or an authorized representative of a member.		
of this o	ordance with section 608.408(3), Florida Statutes, the execution document constitutes an affirmation under the penalties of perjury acts stated herein are true.)		
Richa	rd Dutter, President, Dutter Realty Acquisitions, Inc.		

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)

Typed or printed name of signee