

L10000 129878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 DEC 20 AM 10:28

T. HAMPTON  
DEC 21 2010  
EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: A Chauffeur 4 U, 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:

William H. Meeks, Jr.

Name of Person

William H. Meeks, Jr., PA

Firm/Company

1429 60th Ave. W., Suite 300

Address

Bradenton, FL. 34207

City/State and Zip Code

Denniswj52@aol.com

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

For further information concerning this matter, please call:

Dennis W. Jagdmann

Name of Person

at ( 941 ) 812-5930

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

Phone: 941-755-2674  
Fax: 941-751-0833

**William H. Meeks, Jr.**  
**ATTORNEY AT LAW**  
1429 60th Avenue West, Suite 300  
Bradenton, Florida 34207

Admitted:  
Florida Bar - 1979  
Georgia Bar - 1978

December 17, 2010

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: A Chauffeur 4 U, LLC

Dear Sir/Madame:

Enclosed please find the documents and fees filling the above-referenced company.

Thank you for your time and attention in this matter.

Sincerely,



William H. Meeks, Jr., Esquire

WHM/vks  
enclosures

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

A Chauffeur 4 U, 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:**

5910 Cortez Road W.  
Suite 160  
Bradenton, Fl. 34210

same as office address

**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:

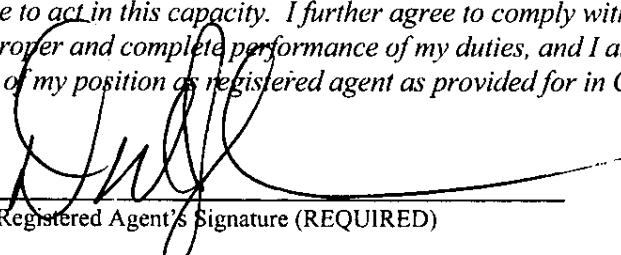
Dennis W. Jagdmann  
Name

5910 Cortez Road W., Suite 160

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

Bradenton FL 34210  
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..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**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

Dennis W. Jagdmann

5910 Cortez Road W., Suite 160

Bradenton, Fl. 34210

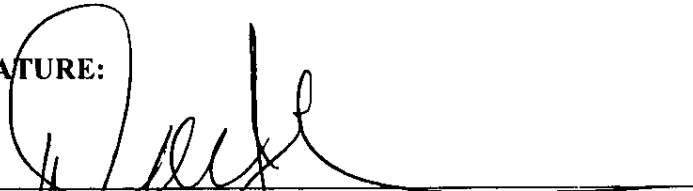
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(Use attachment if necessary)

**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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Dennis W. Jagdmann  
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)

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