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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JAN 28 2011

EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **PSEUDO LIBERTY INVESTMENTS, 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:

Seymour A. Gordon, Esquire

Name of Person

Gay and Gordon Attorneys, P.A.

Firm/Company

P.O. Box 265

Address

St. Petersburg, FL 33731

City/State and Zip Code

gusg20@hotmail.com

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

For further information concerning this matter, please call:

Seymour A. Gordon, Esquire

Name of Person

at (**727**) **896-8111**

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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**ARTICLES OF ORGANIZATION
OF
PSEUDO LIBERTY INVESTMENTS, LLC**

ARTICLE I - Name

The name of the Limited Liability company is: PSEUDO LIBERTY INVESTMENTS, LLC.

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

2166 Grove Place
Clearwater, FL 33764

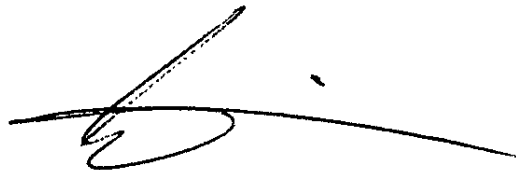
**ARTICLE III - Registered Agent, Registered Office
& Registered Agent's Signature**

The name and the Florida street address of the registered agent are:

Gustavo Adolfo Garcia
2166 Grove Place
Clearwater, FL 33764

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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 in Chapter 698, Florida Statutes.



Gustavo Adolfo Garcia, Registered Agent

ARTICLE IV - Managing Member

The name and address of the Managing Member is as follows:

Title:

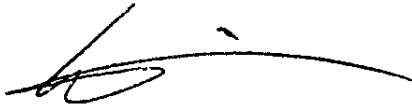
Managing Member

Name and Address:

Gustavo Adolfo Garcia
2166 Grove Place
Clearwater, FL 33764

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TALLAHASSEE, FLORIDA

REQUIRED SIGNATURE:



Signature of 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.)

Gustavo Adolfo Garcia
Typed or printed name of signee