# 1110000137

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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Office Use Only



300190052783

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J. SAULSBERRY **EXAMINER** 

FEB 0 2 2011

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Todd Quasius "L.L.C."  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:
Todd Quesius Name of Person
Todd Quasius 7.1. C. " Firm/Company
Firm/Company  SSE 3  Firm/Company  Address
Hudson, FL 34667  City/State and Zip Code
Grace oublicist (at) vahoo, com  E-mail address: (to be used for future annual réport notification)
For further information concerning this matter, please call:
Todd Guasius at (727) 364-6880  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times 130.00 Filing Fee \times Certificate of Status Certified Copy (additional copy is enclosed)  \$155.00 Filing Fee \times Certificate of Status \times Certified Copy (additional copy is enclosed)
Mailing Address  Registration Section  Rivision of Corporations  Physician of Corporations

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 12, 2011 Relun Van, 23, 2011

TODD QUASIUS 6617 NAUTICAL ISLE HUDSON, FL 34667

Ref. Number: 300190052783

Affidavit

As president and owner of Todd Quasius, Inc. I am notifing the Department of State with this am notifing the Department of State with this affidurit stating I have no intention of reinstating Todd Quasius, Inc. therefore releasing the name for use to another entity.

The new entity is Todd Quasius "L.L.C."

Thank you for consideration,

Todd Quasius

Todd Quasius 6617 Nautical Isle Hudson, FL 34667

Print Todd Quasius Pres.

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:		
Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability	Company is:
Principal Office Address:	Mailing Address:	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis	d Office, & Registered Agent's Sign stered Agent. You must designate an individual or	ature:
business entity with an active Florida registration.)  The name and the Florida street address of the registration.  Todd Or Name	registered agent are:	2011 JAN 31 SECRETARY TABLEAHASSE
	dress (P.O. Box NOT acceptable)  FL 34667 tate, and Zip	AMIII: 11  OF STATE E. FLORIDA

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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
"MGR"	David Quasius
	925 S. Palm Prive
	Largo FL 34690
4-18	
(Use attachment if necessary)	
A DITION E NA COC Mine date 16 Manual and all a	data of Clinary (OPTIONIAL)
ARTICLE V: Effective date, if other than the	e date of filing: (OPTIONAL) se specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
	ARE S
REQUIRED SIGNATURE:	ASS 3
RECORED SIGNATURE.	
	FES
Signote of a mamba	or of an authorized representative of a member.
	<b>B</b> —
constitutes an affirmation unde	8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.
I am aware that any false infor	mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)
	yped 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)