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SECRETARY OF STATE STONISION OF CORPORATIONS

## **COVER LETTER**

TO:		ion Section of Corporations	•
SUBJE	СТ:	Law Firm of Larry Gibl	
		Name of Limite	d Liability Company
The end	losed Artic	les of Organization and fee(s) are s	ubmitted for filing.
		rrespondence concerning this matte	·
-			Name of Person
-			Firm/Company
-		204 West University Ave	
* 44			Address
-		Gainesville, FL 32601	/State and Zip Code
_		peg@turnerandhodge.com E-mail address: (to be used fo	·
For furt		tion concerning this matter, please	
	Peg	O'Connor	352 372_4263
		lame of Person	at (352)372-4263 Area Code & Daytime Telephone Number
Enclose	ed is a che	ck for the following amount:	
	Filing Fee		\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status of Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section	Street/Courier Address Registration Section
		Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
		Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301



January 31, 2011

PEG O' CONNOR 204 WEST UNIVERSITY AVENUE, SUITE 7 GAINESVILLE, FL 32601

SUBJECT: LAW FIRM OF LARRY GIBBS TURNER, P.L.

Ref. Number: W11000005751

We have received your document for LAW FIRM OF LARRY GIBBS TURNER, P.L. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 611A00002528

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Law Firm of Larry Gibbs T (Must end with the words "Limited Liabilit				
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Co	ompany is:		
Principal Office Address:	Mailing Address:			
204 West University Avenue, Suite 7	204 West University Avenue Suite 7			
Gainesville, FL 32601	Gainesville, FL 32601			
business entity with an active Florida registration.)  The name and the Florida street address of the re  Larry Gibbs Turner		CRETARY I		
Name		Y OF SI		
	cy Avenue. Suite 7 ress (P.O. Box NOT acceptable)	RATION:		
Gainesville	FL 32601	•		
City, Stat	te, and Zip			
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity, statutes relating to the proper and complete per	nis certificate, I hereby accept the appoint. . I further agree to comply with the provi	ment as isions of all		

(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>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Larry Gibbs Turner  204 West University Avenue, Suite 7
	Gainesville, FL 32601
<del></del>	
(Use attachment if necessary)	
(If an effective date is listed, the date m	an the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	taring to the second
REQUIRED SIGNATURE:	SECR.
Signature of a	nember of an authorized representative of a member.
constitutes an affirmatio I am aware that any falso	ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true in information submitted in a document to the Department of State is felony as provided for in s.817.155, F.S.)
Larry	Gibbs Turner Typed or printed name of signee
	Typed of printed fiame 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)

The Law Firm of

LARRY GIBBS TURNER PEGGY-ANNE O'CONNOR

Larry Gibbs Turner, PL -

204 WEST UNIVERSITY AVENUE, SUITE 7 GAMESVILLE, FLORIDA 32507 VOICE (352) 372-4263 FAX (382) 373-0360

February 3, 2011

Neysa Culligan, Regulatory Specialist II Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

FACSIMILE ONLY (850) 245-6030

RE: Law Firm of Larry Gibbs Turner, P.L. Ref. No. W11000005751

Dear Ms. Culligan:

Pursuant to our phone conversation of earlier today, this letter serves to document that the official purpose of the organization (Law Firm of Larry Gibbs Turner, P.L.) is to provide professional legal services.

Thank you for your help. Please call if more information is needed.

Sincerely,

Peg O'Connor

PAO/lah