L11000048451

(Danisahada Nama)
(Requestor's Name)
(Address)
(Address)
(idoloss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100203661581

04/22/11--01027--033 **130.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO:

Registration Section

Division of Corp	porations			
SUBJECT: Acquisition	on Consultants Comm	nercial Proper	ty Managem	ent, LLC
SOBJECT:	Name of Limite	ed Liability Compa	any	
The enclosed Articles of 6	Organization and fee(s) are s	submitted for filin	a	
riease return an correspon	ndence concerning this matt	er to the following	5 :	
Rory Willi	iams			
		Name of Person		
 ,,		F:/C		
		Firm/Company		
820 S. La	ake Sybelia Di	IVE Address	,	
		Address		
Maitland, FL			· · · · · · · · · · · · · · · · · · ·	
rory@leasco		y/State and Zip Cod	c	
Torywieaso	E-mail address: (to be used f	or future annual rep	ort notification)	
For further information co	oncerning this matter, please	call:		
Rory Williams		<i>4</i> ∩7	865-300	7
Name of	f Person	at (407 Area Code	e & Daytime Tele	phone Number
	:			
Enclosed is a check for	_	<u></u>		-1
]\$125.00 Filing Fee	J\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin	_	\$160.00 Filing Fee, Certificate of Status &
		(additional cop	• •	Certified Copy (additional copy is enclosed)
	Mailing Address		ourier Address	
	Registration Section Division of Corporations		tion Section of Corporation	S
	P.O. Box 6327	Clifton I	Building	
	Tallahassee, FL 32314		ecutive Center (Jirele .

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Acquisition Consultants Commercial Property Management, 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:	
820 S. Lake Sybelia Drive	820 S. Lake Sybelia Drive	
Maitland, FL 32751	Maitland, FL 32751	
		_

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:

Name

775 South Kirkman Road #101

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

Orlando

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)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	Rory Williams	
	820 S. Lake Sybelia Drive	
	Maitland, FL 32751	
	•	
	A CONTRACT OF THE CONTRACT OF	
(Use attachment if necessary)		
CLE V: Effective date, if other than	the date of filing: (OPTIONA)	
CLE V: Effective date, if other than effective date is listed, the date mus	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days	
CLE V: Effective date, if other than	t be specific and cannot be more than five business days	
CLE V: Effective date, if other than effective date is listed, the date mus	t be specific and cannot be more than five business days	
CLE V: Effective date, if other than effective date is listed, the date mus 0 days after the date of filing.)	t be specific and cannot be more than five business days	s pri
CLE V: Effective date, if other than effective date is listed, the date mus	t be specific and cannot be more than five business days	s pri
CLE V: Effective date, if other than effective date is listed, the date mus 0 days after the date of filing.)	t be specific and cannot be more than five business days	s pri
CLE V: Effective date, if other than effective date is listed, the date mus 0 days after the date of filing.)	t be specific and cannot be more than five business days	s pri
CLE V: Effective date, if other than effective date is listed, the date mus 0 days after the date of filing.) REQUIRED SIGNATURE:	t be specific and cannot be more than five business days	s pri
CLE V: Effective date, if other than reffective date is listed, the date musto days after the date of filing.) REQUIRED SIGNATURE: Signature of a men	the specific and cannot be more than five business days The specific and cannot be more than five business	s pri
CLE V: Effective date, if other than reffective date is listed, the date musto days after the date of filing.) REQUIRED SIGNATURE: Signature of a men	t be specific and cannot be more than five business days mber or an authorized representative of a member. 608.408(3), Florida Statutes, the execution of this document	s pri
CLE V: Effective date, if other than reffective date is listed, the date mus to days after the date of filing.) REQUIRED SIGNATURE: (In accordance with section constitutes an affirmation up I am aware that any false in	mber or an authorized representative of a member. 608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State	s pri
CLE V: Effective date, if other than reffective date is listed, the date musto days after the date of filing.) REQUIRED SIGNATURE: (In accordance with section constitutes an affirmation unline amaware that any false in	mber or an authorized representative of a member. 608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true.	s pri
CLE V: Effective date, if other than effective date is listed, the date must 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a men constitutes an affirmation up I am aware that any false in constitutes a third degree fe	mber or an authorized representative of a member. 608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State	s pri

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)