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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Community Association Law Group  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:
Don McKeever  Name of Person  Name of Person
Don Mckeever P. A. Firm/Company
157 EAST New England Ave. Su 340
$\sim$
WINTER GRK FIX 32789  City/State and Zip Code  MCKeever @ McKeever Law. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Don McKeever at (407) 628-4878  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Community Association Law Grows, (Must end with the words "Limited Liability Company, "L.L.C.," or "L.L.C.")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liabil	ity Company is:	
Principal Office Address: Mailing Address:	address of the principal office of the Limited Liability Company is:  Mailing Address:  Mailing Address:  Same  Same  Gent, Registered Office, & Registered Agent's Signature:  serve as its own Registered Agent. You must designate an individual or another registration.)  et address of the registered agent are:  Name  Name	
157 EAST New England Ave Su 340 (SAME WINTER PARK FLA 32789	20	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Sig (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual business entity with an active Florida registration.)	or another 7	
The name and the Florida street address of the registered agent are:  Chestopher Eri A	21A:	
157 EAST New England Ave Sc Florida street address (P.O. Box NOT acceptable)	340	
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:

"MGRM" = Managing Member	Christopher Exi 157 c Dew England Are	· S
	WINNER PARK FUM 3274	۶ -
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	2: 32 3: 32	
(Use attachment if necessary)		
CLE V: Effective date, if other than the	ne date of filing: (OPTIONAL	_) prior

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.)

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)