1200030247

(Re	equestor's Name)	
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		;
-		

Office Use Only

G. MCLEOD

MAR - 2 2012

EXAMINER



600220370266

02/06/12--01014--019 **125.00

No dies melosad

12 MAR - I AM IO: 46

SERVING IARY OF STATE
INCLAMASSES, FLORING

. .

EMMETT ABDONEY P.A.

A PROFESSIONAL ASSOCIATION OF ATTORNEYS AT LAW 2525 PARK CITY WAY

TAMPA, FLORIDA 33609

TELEPHONE (813) 223-5594 FAX (813) 873-2130

EMMETT ABDONEY*

THE NATIONAL BOARD OF TRIAL ADVOCACY AND THE FLORIDA BAR

CERTIFIED AS A CIVIL TRIAL LAWYER BY

*ALSO ADMITTED IN ALABAMA NEW YORK WEST VIRGINIA

FACSIMILE TRANSMISSION COVER PAGE

TO: Gina-Division of Corporations

FROM: Emmett Abdoney

DATE: 2-29-12

FAX NO.: 850-245-6030

TOTAL NUMBER OF PAGES: 4

329 PH 1:

FE# 29 PH 1:51

RE: Filing of Fisher Investment Properties, LLC. (See your reference #W12000007473)

There were two (2) LLC.'s sent to your office on February 6, 2012. Apparently one (1) got filed and this one didn't get filed. I would appreciate it if you woul file this one with the fees already having been paid. I just talked to Joey regarding this matter and he told me to fax this LLC to your attention and it would get filed. Please let me know if there is any problem. Thanks.

If you do not receive this facsimile or the correct amount of pages, please call.

THIS COMMUNICATION IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW.



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2012

PAMELA W FISHER 713 BUNKER VIEW DR APOLLO BEACH, FL 33572

SUBJECT: FISHER'S HYDRAULICS, MACHINING & FABRICATIONS, LLC.

Ref. Number: W12000007473

We have received your document for FISHER'S HYDRAULICS, MACHINING & FABRICATIONS, LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on February 6, 2012.

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) 245-6851.

Letter Number: 912A00005312

Gina McLeod Regulatory Specialist II

www.sunbiz.org

A ...

COVER LETTER

TO:	TO: Registration Section Division of Corporations				
SUBJ	_{вст} . Fish	ner Investment Prop	perties, LLC	;	
5000	2011	Name of Limit	ed Liability Compar	ny	
The er	nclosed Article	es of Organization and fee(s) are	submitted for filing.	•	
Please	return all con	respondence concerning this matt	er to the following:		
	Pamela	a M. Fisher			
			Name of Person		
			Firm/Company		
	713 Bu	nker View Drive			
			Address		
	Apollo B	each, Florida 33572			
	ginaphe	دا ehaw@verizon. net	y/State and Zip Code		
		E-mail address: (to be used	or future annual repo	rt notification)	
For fu	rther informat	ion concerning this matter, please	e call:		
Pan	nela M. Fis	sher	at (624-3845	
	N.	ame of Person	Area Code	& Daytime Tel	ephone Number
Enclo	sed is a chec	k for the following amount:			
√]\$125.0	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155,00 Filin Certified Cop (additional copy	by .	\$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	Registration Division (Clifton Bo 2661 Exec	on Section of Corporation uilding cutive Center ee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - The name of the	Name: le Limited Liability Company is:
Fisher Inv	vestment Properties, 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:
713 Bunker View Drive	713 Bunker View Drive
Apollo Beach, Florida 33572-2806	Apollo Beach, Fl. 33572-2806

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:

City, State, and Zip			ئ ج	أمسك
Apollo Beach,	_{FL} 33572-2806	ing for	<u>5</u>	January .
Florida street address (P.O. Box NOT acceptable)		(1) (2) (1) -<	740	i Samura
713 Bunker View Drive			20 1	English English
Name		4-30	KAR	en j
Pamela M. Fisher			12	
	-			

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)

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 Membe	ग
MGR	Pamela M. Fisher
	713 Bunker View Drive
	Apollo Beach, Florida 33572-2806
MGRM	Nelson Fisher
	713 Bunker View Drive
	Apollo Beach, Fl. 33572-2806
(Use attachment if necessary)	
AND POST OF THE TOP OF THE PART OF THE PAR	(OPTIONAL)
AKTICLE V: Effective date, if other if	nan 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.)	must be specific and cannot be more than five business days prior
to or you days after the date of ming.)	
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)