## L/2000042218

(Requestor's Name)	
(Address)	
(Address)	<u> </u>
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PICK-UP WAIT	MAIL
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J. BRYAN

MAR 2 7 2012

**EXAMINER** 

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: The Col	Mer Frm, LLC Name of Limited Li	ability Company	
	Nume of Emitted Em	ubinty Company	
The enclosed Articles of	Organization and fee(s) are subm	itted for filing.	
Please return all correspo	ndence concerning this matter to	the following:	
Devin D	Collier, Esq.	e of Person	70. 70
The Colli	er Firm, LLC	/Company	27 F
1974 Mid	lyette Road, # 1213	Address	1.51
Tallahasse	L, FL 32301 City/State	e and Zip Code	***
Collier. de	VINCAMAN-COM E-mail address: (to be used for fut	ure annual report notification)	
For further information co	oncerning this matter, please call:		
Devin D. Colliname of		850 <u>791-13</u> Area Code & Daytime Tel	74 ephone Number
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	Certificate of Status	155.00 Filing Fee & [ Certified Copy additional copy is enclosed)	\$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	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
The Collier Firm, LLC (Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	ين الله الله الله الله الله الله الله الل
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1974 Midyette Road, #1213	1974 Michaette Rogel, #1213 Tullahassee, FC 32301
Tallahoussee, FL 32301	Tullahassee, FC 32301
	egistered agent are:
Talla hassa City, Sta	FL 3736) te, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all reformance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S
Registered Agent's Signatu	ure (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	Name and Address:
"MGRM" = Managing Member	
MGRM	Devan D. Collier 1974 Midvette Road, #1213 Tallahassee, FL 32301
	······································
(Use attachment if necessary)	
	e date of filing: (OPTIONAL
effective date is listed, the date must b	be specific and cannot be more than five business days
effective date is listed, the date must b	
effective date is listed, the date must b	
effective date is listed, the date must b 90 days after the date of filing.)	
effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:	
effective date is listed, the date must be 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a	pe specific and cannot be more than five business days

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)