# 412000048291

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	—
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	—
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
A. LUNT	
APR -9 2011	
EXAMINER	

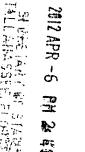
Office Use Only



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200224459912 03/15/12--01017--006 \*\*78.75

04/06/12--01003--002 \*\*51.25



Please find enclosed the corrected paperwork for Phoenix Services and Support of North Florida, L.L.C.

I have enclosed the email copy of the letter that was sent as well.

Thank you for your assistance in this matter.

Regards,

Susan B. Wyatt

2812 APR -6 FH 28 48

12 MAR 30 MH 11: 30



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 16, 2012

SUSAN B WYATT 895 RUM ISLAND TERRACE FORT WHITE, FL 32038

SUBJECT: PHOENIX SERVICES AND SUPPORT OF NORTH FLORIDA, L.L.C.

Ref. Number: W12000015310

We have received your document for PHOENIX SERVICES AND SUPPORT OF NORTH FLORIDA, L.L.C. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted the document and fees to form a Florida corporation; however, your name implies you wish to form a limited liability company. The name of a corporation cannot contain a limited liability company suffix. Limited Liability Company, Ltd. Liability Co., and L.L.C. are all limited liability company suffixes. The name of a corporation must contain Corporation, Corp., Incorporated, Inc., Company or Co.

Please correct the suffix or, if you wish to form a limited liability company, submit "Articles of Organization" along with the additional fee(s). Any fees previously submitted with your corporate filing will be applied to your limited liability company filing.

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) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 512A00009534

, F

## **COVER LETTER**

TO:	Registration of	on Section f Corporations				
SUBJE	CT: PHO	ENIX SERVICES AND SUF	PPORT OF NORTH FLORIDA,	L.L.C.		
Name of Limited Liability Company						
The enc	losed Article	es of Organization and fee(s) are	submitted for filing.	2112 MR -6		
Please re	Please return all correspondence concerning this matter to the following:					
3	Susan	B. Wyatt		の意の		
			Name of Person			
_			Firm/Company	is part 2.5		
_	27202 NW 203rd Place					
-	· · · · - · · · · · · · · · · · · · · ·		Address			
_	High Sp	orings, FL 32643				
_			ty/State and Zip Code			
<u> </u>	gwen@c	avediveflorida.com  F-mail address: (to be used	for future annual report notification)			
East South		·	·			
ror turu	ner intormat	ion concerning this matter, pleas	e can:			
Sus	an B. W	yatt	_at ( 352 ) 363-0618			
	Na	ime of Person	Area Code & Daytime Teleph	one Number		
Enclose	ed is a chec	k for the following amount:				
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	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, El. 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building	cle		

Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	·
PHOENIX SERVICES AND SUPPORT OF	NORTH FLORIDA, L.L.C.
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
The management and short and short and pro-	morpus company and
Principal Office Address:	Mailing Address:
895 Rum Island Terrace	27202 NW 203rd Place
Fort White, FL 32038	High Springs, FL 32643
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registations) business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
James L. Wyatt Jr.	21
Name	rd Place
27202 NW 203r	d Place
Florida street add	ress (P.O. Box NOT acceptable)
High Springs,	FL 32643
City, Sta	te, and Zip
Having hear named as resistant description	vacant namica of necess for the above stated limited

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Men	Name and Address:
MGRM	Susan B. Wyatt  27202 NW 203rd Place  High Springs, FL 32643
MGRM	Victoria K. Hurd 6611 West County Road 18 Lake Butler, FL 32054
**************************************	
(Use attachment if necessary	
	tr than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days prior than the date of filing:
<u>REQUIRED</u> SIGNATURI	Σ:
Signature o	Sysan Beach Watt of a member or an authorized representative of a member.
(In accordance with constitutes an affirm I am aware that any	section 608.408(3), Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.)

Susan Beach Wyatt

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)