

L12000100755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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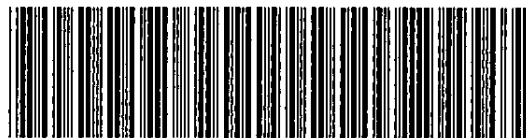
(Business Entity Name)

(Document Number)

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Effective Date 8-1-12

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

AUG 6 2012

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Southeast Compounding Pharmacy
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:

Geoff Becker

Name of Person

Becker Enterprises, LLC

Firm/Company

32 Timberland Cr. N

Address

Fort Myers, FL 33919

City/State and Zip Code

geoff.bckr@gmail.com

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Geoff Becker

at (**239**) **707-7477**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 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 Corporations
Clifton Building
2661 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:

Southeast Compounding Pharmacy 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:

9519 E. Martin Luther King Blvd.
Tampa, FL 33910

Mailing Address:

PO Box 2468
Fort Myers, FL 33902

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:

Sue Menke

Name

7202 Pelias Circle

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

North Fort Myers FL 33917

City, State, and Zip

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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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Becker Enterprises, LLC

32 Timberland Cr. N.

Fort Myers, FL 33919

MGR

Warren Cal Gray, Jr.

860 Lake Elbert Dr. SE

Winterhaven, FL 33880

MGR

Frank Ruddy

4 Woodruff Way

Columbia, NJ 07832

MGR

Jeff Steele

11730 Timberline Cr.

Fort Myers, FL 33966

MGR

(Use attachment if necessary)

Milton Larrea

5812 Tallowood Cr.

Fort Myers, FL 33919

ARTICLE V: Effective date, if other than the date of filing: 08/01/2012 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Geoff Becker

Typed or printed name of signer

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)