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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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EXAMINER



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DIVISION OF CERTIFICATIONS
DIVISION OF CERTIFICATIONS

09/17/12--01030--004 **160.00

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SECRETARDEARD OF ROUSING STATE

COVER LETTER

TO: Registration Section **Division of Corporations** Insurance & Investments, LLC 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: Stephen Ifasi Name of Person Insurance & Investments, LLC Firm/Company 5244 Gato Del Sol Circle Address Wesley Chapel / Florida 33544 City/State and Zip Code steveifasi@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Stephen Ifasi Name of Person Enclosed is a check for the following amount: \$155.00 Filing Fee & \$160.00 Filing Fee, \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status & Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) (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

ARTICLE I - Name: The name of the Limited Liability Company is: Insurance & Investments, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LL.C.," or "

Mailing Address:

5244 Gato Del Sol Circle Wesley Chapel, FL 33544

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

The name and the Florida street address of the registered agent are:

Principal Office Address:

Tampa, FL 33613

14310 Hanging Moss Circle, #102

business entity with an active Florida registration.)

	Name
5244 Gato D	el Sol Circle
Florida	street address (P.O. Box NOT acceptable
Wesley Chapel	_{FL} 33544
	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)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Stephen Ifasi 5244 Gato Del Sol Circle Wesley Chapel, FL 33544 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 09/17/12 _____. (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.) Stephen Ifasi Typed or printed name of signee

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)