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SECRE JARY OF STATE TALL AHASSEE, FLORIDA

J. SAULSBERRY EXAMINER OCT 25 2012

COVER LETTER

TO: Registration Division of C				
SUBJECT: Solut	ions by Jeffrey Hau	ISER L.L.C.		
The enclosed Articles	of Organization and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
Jeffrey F				-politic
	Na	ame of Person		
Solutions	s by Jeffrey Hauser	L.L.C.		-
	Fi	nn/Company		
8951 SW	8th st			_
		Address		_
Plantation,	FL 33324		SEC	2012,0CT 214
	•	tate and Zip Code	AH	87
jeffreyhaus	er@gmail.com	6	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	7 7
For further information	E-mail address: (to be used for to concerning this matter, please ca	-	m C	
Jeffrey Hauser	a	, 954 ₎ 5340810		ල ආ ර්
Name	of Person	Area Code & Daytime Telepl	hone Number	•
Enclosed is a check f	or 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 enclose	
	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 Cit Tallahassee, FL 32301	rcle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compar	ny is:
Solutions by Jeffrey Hause	er L.L.C.
(Must end with the words "Limited	I Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of t	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:

ARTICLE I - Name:

8951 SW 8th Street Plantation , FL 33324	8951 SW 8th Street Plantat	tion , FL 33324
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Regions business entity with an active Florida registration.) The name and the Florida street address of the	red Office, & Registered Agent gistered Agent. You must designate an indi	t's Signature:
The name and the Florida street address of the	e registered agent are:	
Robert Hauser		T 24
Nan	me	
8951 SW 8th St	reet	AM & 50 C. FLORIDA
Florida street a	address (P.O. Box NOT acceptable)	50 S
Plantation	_{FL} 33324	

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..

City, State, and Zip

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:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Jeffrey Hauser
	8951 SW 8th st
	Plantation, FL 33324
• /	
LE V: Effective date, if other thatective date is listed, the date m	on the date of filing: (OPTIONA ust be specific and cannot be more than five business day.
LE V: Effective date, if other thatective date is listed, the date m	on the date of filing: (OPTIONA ust be specific and cannot be more than five business days
(Use attachment if necessary) LE V: Effective date, if other thate fective date is listed, the date m days after the date of filing.)	un the date of filing: (OPTIONA ust be specific and cannot be more than five business days
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LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE:	ust be specific and cannot be more than five business days SECRETARY SECRETARY Denomination of a member.
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE: Signature with a m	nember or an authorized representative of a member.
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE: Signature with a m (In accordance with sections constitutes an affirmation)	nember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document is under the penalties of perjury that the facts stated herein are true.
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE: Signature with a n (In accordance with section constitutes an affirmation I am aware that any false	nember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document
LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE: Signature with a n (In accordance with section constitutes an affirmation I am aware that any false	nember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)