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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
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12/26/13--01003--030 **160.00

EFFECTIVE DATE 01-01-14

TALLANASSEE TOO

B. BOSTICK

JAN - 2 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PERRAULT TAX AND ACCOUNTING SVC, 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:
ROGER R PERRAULT Name of Person
PERRAULY TAX AND ACCOUNTING SVC LLC Firm/Company
13750 ALLAMANDA CIRCLE
PORT CHARLOTTE FL 33981
PERRAULT 46 @ EmOAR & MAIL. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Rocer Perrance at (941) 830-0301 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: \$\$\text{\$\exitit{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLE I Name

ARTICLE 1 - Name:			
The name of the Limited Liability Company is:			
PERRAUCT TAX AND ACCOUNT, (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	176 S	rc	ردد
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited I	Liability C	Compa	ny is:
Principal Office Address: Mailing Address:			
PORT CHARLOTTE, FL 33981		- -	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an indibusiness entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are:			
ROGER R PERRAULT	S		
Florida street address (P.O. Box NOT acceptable)	\$1.00 P.	§ 26	
Florida street address (P.O. Box NOT acceptable)			
POET CHARLOTTE FL 33981		:2 13	• •
City, State, and Zip	₩.	477	

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)

<u>Title:</u> "MGR" = Manager	Name and Address:
'MGRM" = Managing Member M GC	ROGER PERRAUT 13750 ALLAMANDA CID
Use attachment if necessary)	1 1
	ne date of filing: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	
Signature of a memb	per or an authorized representative of a member.
	08.408(3), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true.

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

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)

Typed or printed name of signee