# L1500032073

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(6)	JOhn Tin IDham	- 46
(CII	y/State/Zip/Phone	9#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700269329167

02/17/15--01014--012 \*\*125.08



## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Precedent Setters LCC 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:
Michael Massey
Name of Person
Massey & Duffy
Firm/Company  GTF Univ. Ave
Address
Gainesville FL 32601
Gainesville FL 32601  City/State and Zip Code  Masseylaw @ gmail. Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (354) Soy - 9900  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status  S155.00 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

The name of the Limited Liability Company is:
(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:  SSS F. Univ. Ave Gain Civille Fe 32601  Mailing Address:  SAME
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:    Signature
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 605, F.S
Registered Agent's Signature (REQUIRED)
(CONTINUED)

Page 1 of 2

. <u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Patricia J. Duffy 855 E. Univ. Auc Gamesville FL 32601
(Use attachment if necessary)	
FICLE V: Effective date, if other than in effective date is listed, the date musdate of filing.)	he date of filing:
FICLE V: Effective date, if other than in effective date is listed, the date musdate of filing.)	he date of filing:
TICLE V: Effective date, if other than I	
TICLE V: Effective date, if other than the effective date is listed, the date must date of filing.)  TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	t be specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the specific and cannot be more than five business days after the spe
TICLE V: Effective date, if other than in effective date is listed, the date must date of filing.)  TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature (In accordance with seconstitutes an affirmatic I am aware that any false)	

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