P10180		
L15000287019		
700272342627		
04/29/1501026007 **130.00		
SECRETARY OF STATE 15 HAY 18 PH 1: 19 SECRETARY OF STATE FAILLAHASSEE, FLORIDA		

COVER LETTER

TO: **Registration Section Division of Corporations** LLC SUBJECT: 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:

NAGEMENT

TERCO MI Firm/Company

VTT 301 GOLDENC Address

City/State and Zip TNTERCOMANAGE MENT. COM JARV

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

For further information concerning this matter, please call:

 202
 4/13
 - 6474

 Code
 Daytime Telephone Number
RECHNERAL Name of Person Area Code

Enclosed is a check for the following amount:

\$125.00 Filing Fee

30.00 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

PH 나:

ഹ

Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address **Registration Section Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

• • • • • • • • • • • • • •



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2015

GARY E. KIRSCHNER 136 GOLDEN GATE POINT UNIT301 SARASOTA, FL 34236

SUBJECT: PROJECT BOSS, LLC Ref. Number: W15000031844

We have received your document for PROJECT BOSS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records reflect you have previously established a limited liability company by this name. If you are trying to establish another limited liability company, you must select a different name, amend the enclosed documents to reflect the new name, and resubmit the enclosed document(s) to our office for filing. If you are trying to file the Annual Report for the pre-established limited liability company, please respond to this letter, ask us to abandon this filing, and request a refund. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed.

Effective January 1, 2009, all Annual Reports must be submitted online. To file the Annual Report for the pre-established limited liability company, simply go to our website, www.sunbiz.org, andclick on the blue box entitled "File the Annual Report or Amended AnnualReport Here," which is located in the middle of the page. Next, enter the limited liability company's Florida document number in the appropriate box and click the "submit" button. Annual Report payments can be made by credit card, debit card, or by check or money order. For credit card and debit card processing allow 2-3 days; if paying by checkor money order allow 35 weeks. An Annual Report will be processed and posted after the credit card or debit card payment is confirmed or when the check or money order and the required payment voucher are received and processed by our office. All payment options will display after you complete and submit your Annual Report online.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 215A00009319

SECRETARY OF STATE ISION OF CURPORATION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

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: Mailing Address: ARASATA 342

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:

- 301 street address (P.O. Box NOT acceptable) Zip City State

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 are registered agent as provided for in Chapter 605, F.S.

red Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

f.

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Name and Address:

Title: "AMBR" = Authorized Member "MGR" = Manager MGR

AMBR

ITERGO TIANALEA GATE 301 RECHNER DIS ASHLEY DRIVE ITE IOU SUTH 602 PITALITY WOODBURN ARBAR CHNOLOGIE HURST HAPEL

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ______. (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REOUIRED SIGNATURE: isimi Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), 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.) IR SC Typed or printed name of signee **Filing Fees:** MAY \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) $\overline{\mathbf{\omega}}$ \$ 5.00 Certificate of Status (Optional) 무 ÷ Page 2 of 2



- Louisiana | Mississippi | Texas | Florida | Alabama | North Carolina | London

DONALD H. WHITTEMORE Partner (813) 472-7550 whittemd@phelps.com

÷.

May 18, 2015

31735-0001

VIA FACSIMILE (850-245-6030)

Department of State Division of Corporations Attention: Stacey Mason Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

> Re: Project Boss, LLC, a Florida limited liability company ("Company") Document Number: L15000017742.

Dear Ms. Mason:

Please consider this letter my firm's authorization to release the name Project Boss, LLC, a Florida limited liability company to Gary E. Kirschner to form a new limited liability company. We have no intention of reinstating the above Company.

If you have any questions or need anything further, please feel free to contact me at (813) 472-7556.

Sincerely

Donald H. Whittemore

DHW/sjw

SECHETARY (15 MAY 18	FILED SECRETARY OF STATE IVISION OF CORPORATION
	PH 4: 19	LEU Y OF STATE ORFORATION

1000

- COUNSELORS AT LAW -

100 South Ashley Drive, Suite 1900 | Tampa, Florida 33602-5311 | 813-472-7550 | 813-472-7570 Fax | phelpidunbar.com