

L15000087019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA
15 MAY 18 PM 4:19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PROJECT BOSS, 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:

GARY E. KIRSCHNER
Name of Person

INTERCO MANAGEMENT
Firm/Company

136 GOLDEN GATE POINT, UNIT 301
Address

SARASOTA, FL 34236
City/State and Zip Code

GARY@INTERCOMANAGEMENT.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARY KIRSCHNER (202) 413-6474
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for 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 enclosed)

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

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DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA
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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, and click on the blue box entitled "File the Annual Report or Amended Annual Report 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 check or money order allow 3-5 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

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DIVISION OF CORPORATIONS
15 MAY 18 PM 4: 19

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PROJECT BOSS, LLC

(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:

100 SOUTH ASHLEY DR.
SUITE 100
TAMPA, FL 33602

Mailing Address:

136 GOLDEN GATE POINT
UNIT 301
JARASOTA, FL 34236

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:

GARY E. KIRSCHNER
Name

136 GOLDEN GATE POINT UNIT 301

Florida street address (P.O. Box NOT acceptable)

JARASOTA FL 34236
City State 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 605, F.S.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

INTERCO MANAGEMENT, INC
136 GALLED GATE POINT UNIT 301
SARASOTA FL 34236

AMBR

CHRIS KIRSCHNER, INC
100 SOUTH ASHLEY DRIVE SUITE 100
TAMPA, FL 33602

AMBR

SUSSEX HOSPITALITY, LLC
105 WOODBURN COURT
SAFETY HARBOR, FL 34695

AMBR

TAMPA BAY TECHNOLOGIES, LLC
2103 GWYNHURST BLVD
WESLEY CHAPEL, FL 33543

(Use attachment if necessary)

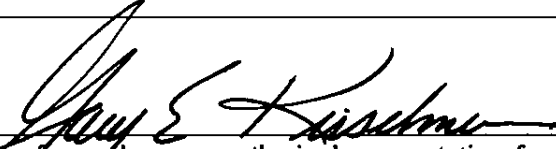
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

REQUIRED SIGNATURE:



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.)

GARY KIRSCHNER

Typed or printed name of signee

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)

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DIVISION OF CORPORATION
15 MAY 18 PM 4:19
TALLAHASSEE FLORIDA

PHELPS DUNBAR
LLP

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

DONALD H. WHITTEMORE
Partner
(813) 472-7550
whitcemd@pelps.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

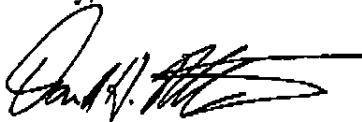
Re: Project Boss, LLC, a Florida limited liability company ("Company")
Document Number: L15000017742

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

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DIVISION OF CORPORATIONS
15 MAY 18 PM 4:19
TALLAHASSEE, FLORIDA

COUNSELORS AT LAW

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