

L16000011177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

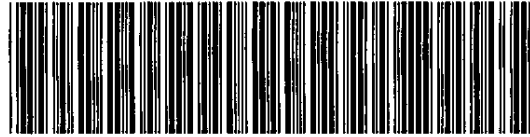
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

W15 80217 WMD 1/21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 14, 2015

WILLIAM B. PATTERSON
35# ANASTASIA DRIVE
FORT WALTON BEACH, FL 32548

SUBJECT: PATTERSON & PATTERSON LLC
Ref. Number: W15000080217

We have received your document for PATTERSON & PATTERSON LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Correct the spelling of the Street name in the Registered Agent's address.

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) 245-6052.

Maryanne Dickey
Regulatory Specialist II

Letter Number: 415A00026089

Jan. 17, 2016

TO: Florida Department of State
Division of Corporations

From: William Patterson
35 Anastasia Dr SE
Ft. Walton Beach, FL
32548

Sub: Patterson & Patterson LLC Ref. Number W15000080217

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18 JAN 19 PM 4:47
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

I am enclosing document with all corrections requested for Patterson and Patterson LLC. As a note of interest there is no addresses on this application that are a PO Box. All addresses our current Fort Walton Beach post office Street addresses with mail delivered at business are resident boxes.

Thank you for your assistance.

Sincerely



William B Patterson

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Patterson & Patterson 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:

98 Miracle Strip Pkwy
Suite 105
Fort Walton Beach, Florida 32548

Mailing Address:

35 Anastasia Dr SE
Fort Walton Beach, Florida 32548

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

16 JAN 19 2:09 PM '09

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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.)

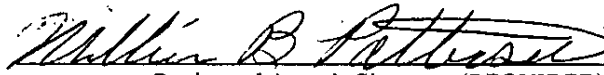
The name and the Florida street address of the registered agent are:

William B Patterson
Name

35 Anastasia Dr SE
Florida street address (P.O. Box **NOT** acceptable)

<u>Fort Walton Beach</u>	<u>Florida</u>	<u>32548</u>
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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

William B. Patterson
35 Anastasia Dr SE
Fort Walton Beach, Florida 32548

AMBR

Tammy L Patterson
35 Anastasia Dr SE
Fort Walton Beach, Florida 32548

AMBR

Sonya L Patterson
35 Anastasia Dr SE
Fort Walton Beach, Florida 32548

AMBR

Mark W Patterson
35 Anastasia Dr SE
Fort walton Beach, Florida

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TALLAHASSEE, FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 17, 2016 . (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.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

William B. Patterson

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)