# 17000 133066

(Requestor's Name)
(Address)
(Address)
( isaloss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2.1. 2.1. 2.1.)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500300338445

06/19/17--01013--009 \*\*155.00



# Dean Lampe Victory Towing & Recovery, LLC 221 18<sup>th</sup> Av NE St. Petersburg, FL 33704

June 13, 2017

Secretary of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Victory Towing & Recovery, LLC

Dear Sir or Madam:

Enclosed please find the original and one copy of Articles of Organization, together with a check in the amount of \$155.00. This represents the cost of the Filing Fees, Certified Copy of Articles of Organization and Fee for Registered Agent Designation for the above-named organization.

Very truly yours,

Dean Lampe

Victory Towing & Recovery, LLC

Enclosures

check stapled here

#### ARTICLES OF ORGANIZATION

of

## **VICTORY TOWING & RECOVERY, LLC**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, hereby forms a limited liability company under the laws of the State of Florida.

#### **ARTICLE I - ORGANIZATION NAME**

The name of the organization is Victory Towing & Recovery, LLC.

#### **ARTICLE II - DURATION**

The limited liability company shall exist perpetually unless dissolved according to Florida law.

#### **ARTICLE III - PURPOSE**

The limited liability company is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida, and to be afforded all the protections of the laws of the State of Florida afforded to limited liability companies.

### **ARTICLE IV - ORGANIZATION OFFICE**

The organization's principal office address shall be as follows:

221 18<sup>th</sup> Av NE St. Petersburg, FL 33704

The organization's mailing address shall be as follows:

221 18<sup>th</sup> Av NE St. Petersburg, FL 33704

# ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the Initial Registered Office and Agent of this Organization is:

Dean Lampe 221 18<sup>th</sup> Av NE St. Petersburg, FL 33704

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.

Dean Lampe, Registered Agent

#### **ARTICLE VI - MANAGERS**

This organization shall have one (1) manager initially. The number of managers may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The name and address of the initial manager of the organization is as follows:

Dean Lampe 221 18<sup>th</sup> Av NE St. Petersburg, FL 33704



#### **ARTICLE VII - SIGNER**

The name and address of the person signing these Articles of Organization is as follows:

Dean Lampe 221 18<sup>th</sup> Av NE St. Petersburg, FL 33704

#### **ARTICLE VIII - MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers who are also members and is, therefore, a member – managed company.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Organization this 14 day of June, 2017

Dean Lampe

STATE OF FLORIDA (COUNTY OF PINELLAS)

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Dean Lampe, known to me to be the person who executed the foregoing Articles of Organization, who presented 10 metrics as identification, and who acknowledged before me that he executed these Articles of Organization.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this \_\_\_\_\_\_\_ day of June, 2017

Notary Public, State of Florida at Large My Commission Expires:

hee hele

