

L17000 135711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

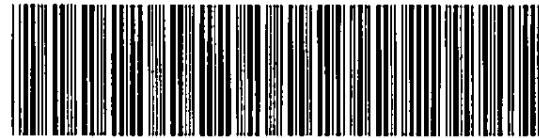
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000300334010

06/21/17--01024--001 \*\*160.00

2017 JUN 21 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR

William T. Bonner, Esq.  
4335 Ortona Lane ~ Wesley Chapel, FL 33543  
(813) 732-6341

June 13, 2017

*Via First Class Mail:*

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: HOME COMPASS, LLC/ Articles of Organization**


Dear Administrator:

Please find enclosed the original and a copy of the Articles of Organization for the above-referenced limited liability company, along with a money order in the amount of \$160.00 made payable to Florida Department of State.

Please file the Articles of Organization and return a certified copy and Certificate of Status at your earliest possible convenience.

Thank you for your time and attention to this matter.

Sincerely,

  
William T. Bonner, Esq.  
[bill@wrtampa.com](mailto:bill@wrtampa.com)

2017 JUN 21 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FL 32314

**ARTICLES OF ORGANIZATION  
FOR  
HOME COMPASS, LLC**

*In compliance with the requirements of Chapters 605, Florida Statutes, the undersigned, being a natural person, hereby acts as incorporator in adopting and filing the following Articles of Organization for the purpose of organizing a Florida limited liability company for profit.*

**ARTICLE I**

**Name**

The name of the limited liability company is: HOME COMPASS, LLC (the "Limited Liability Company").

**ARTICLE II**

**Effective Date**

The effective date of the Limited Liability Company shall be July 1, 2017.

**ARTICLE III**

**Principal & Mailing Address**

The complete street and mailing address of the initial designated principal office of the Limited Liability Company is:

23612 State Road 54  
Lutz, FL 33559

**ARTICLE IV**

**Registered Agent**

The name and street address of the initial registered agent of the Limited Liability Company is:

WILLIAM T. BONNER, ESQ.  
23612 State Road 54  
Lutz, FL 33559

2017 JUN 21 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## **ARTICLE V**

### **Statement of Acceptance by Registered Agent**

I, William T. Bonner, Esq., Registered Agent, 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, 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, Florida Statutes.



William T. Bonner, Esq., Registered Agent

## **ARTICLE VI**

### **Member(s)**

The member(s) of the Limited Liability Company and their addresses are:

William T. Bonner  
23612 State Road 54  
Lutz, FL 33559

Kendall E. Bonner  
23612 State Road 54  
Lutz, FL 33559

## **ARTICLE VII**

### **Management**

The Limited Liability Company will be Manager-Managed. The name and address of the Manager of this Limited Liability Company is:

William T. Bonner  
23612 State Road 54  
Lutz, FL 33559

2017 JUN 21 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

FILED

## **ARTICLE VIII**

### **Purpose**

The purpose for which the Limited Liability Company is organized is to conduct any and all lawful business for which limited liability companies can be organized pursuant to Florida Statutes.

## **ARTICLE IX**

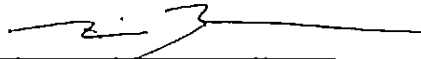
### **Liability**

Pursuant to Section 605.04093, Florida Statutes, any and all debts, obligations or other liabilities of the Limited Liability Company are solely the responsibility of HOME COMPASS, LLC. Any manager or member of HOME COMPASS, LLC is not personally liable for such debts or liabilities of the Limited Liability Company solely by reason of their title.

## **ARTICLE X**

### **Organizer**

I, William T. Bonner, residing at 4335 Ortona Lane, Wesley Chapel, FL 33543, execute these Articles of Organization dated this 13<sup>th</sup> day of June, 2017.



William T. Bonner, Organizer

In accordance with F.S. 605.0203, 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 Section 817.155, Florida Statutes.

2017 JUN 21 PM 3:57  
SECRETARY OF STATE  
TAMM LASSER, FLORIDA

FILED