

L17000207244

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

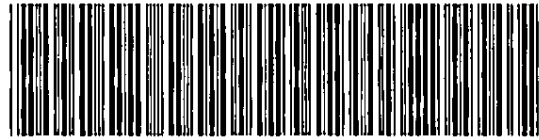
(Document Number)

Certified Copies _____

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10/06/17--01021 -005 **125.00

17 OCT -6 AM 10:50
SECRETARY OF STATE
TALLAHASSEE FLORIDA



September 22, 2017

Florida Department of State
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Scientific Financing, LLC

Ladies and Gentlemen:

Enclosed for filing please find Articles of Organization to form the above limited liability company. Kindly process the enclosed and return you letter of acknowledgment to our office in the envelope provided. A check in the amount of \$125.00 representing the filing fee is also enclosed.

If you have questions, do not hesitate to contact the undersigned. Thank you for your assistance.

Very truly yours,

Denise A. Gierach

DAG/jas
Enclosure

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Scientific Financing, 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:

Denice A. Gierach
Name of Person

The Gierach Law Firm
Firm/Company

1776 Legacy Circle, Suite 104
Address

Naperville, IL 60563
City/State and Zip Code

julies@gierachlawfirm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denice A. Gierach at (630) 756-1160
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

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

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Scientific Financing, LLC

(Must contain 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:

1936 Bruce B Downs Blvd

PMB 184

Wesley Chapel, FL 33543

Mailing Address:

1936 Bruce B Downs Blvd

PMB 184

Wesley Chapel, FL 33543

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:

Ross Wiltse

Name

4597 Barletta Court

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

Wesley Chapel

FL

33543

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)

17 OCT -6 AM 10:50
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR/MGR

AMBR/MGR

Name and Address:

Ross Wiltse

4597 Barletta Court

Wesley Chapel, FL 33543

Larry Fletcher

2179 Meadows Court

Grand Junction, CO 81503

(Use attachment if necessary)

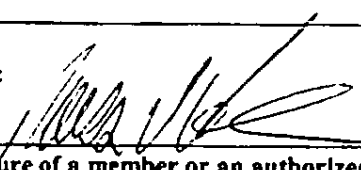
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

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.

Ross Wiltse

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)

RECEIVED
FLORIDA
OCT - 6 AM 10:50
TALLAHASSEE