Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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Email Address:_____

FLORIDA LIMITED LIABILITY CO.

Wiregrass Raymond James, LLC

Certificate of Status	Û
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Estimated Charge	\$155.00

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Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARIACLES	OF DROWN EATHON FOR	FLORIDA IAMITED	LIABILITY COMPANY		
ARTICLE I - Name:					
The name of the Limited Liab	ility Company is:				
Wiregrass Raymo	nd lamae IIC				
	ontain the words "Limited	Liability Company	"L.L.C. " or "L.C.")	Amelingues agence	
,			Diblot, W. Dibe.		
ARTICLE II - Address:		وروس سوم			
The mailing address and stree	t andress of the principal (office of the Limited	Liability Company is:		
Prins	ripal Office Address:		Mailing Address:		
880 Carillon Park	way	Attn	: Legal Department		
St. Petersburg, FL	33716		Carillon Parkway		
		<u>St. E</u>	etersburg, FL 33716		
ARTICLE III - Registered A (The Limited Liability Companion business entity with a The name and the Florida stre	nny cannot serve as its owr in active Florida registration	n Registered Agent." on.)	it's Signature: You must designate an individual o	<u>ហ៊ី</u>	1/1.ich
the name and the Profita Side		•		19	
	CT Corporation Sys	stem		=	
		Name		- -	5:42
	1200 South Pine Isla	and Road		£ 1:43	10 (12 1
	Florida street eddres	ss (Р.О. Вох <u>NOT</u> а	eceptable)	ت ا	::-
	Plantation,	Florida	33324	•	•
	City	State	Zip		
taving been named as registere	ed agent and to accept serv	ice of process for the	above stated limited liability comp ed agent and agree to act in this cap	any at the	
urther agree to comply with the	ne, thereovercept me upp provisions of all stanues	ommen as regimen elating to the proper	eu agent and agree to act in this cap and complete performance of my d	racity. 1 rative and l	
3	The second of the free property	mound in the broken	conditions her les immer til mil. et	MATERIAL A	

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

CT Corporation System

By:

Registered Agent's Signature (REQUIRED)

Stephen Rullis

(CONTINUED)

VP & Asst. Secy.

Title:	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	
MGR	Raymond James & Associates, Inc.
	880 Carillon Parkway St. Petersburg, FL 33716
	St. Petersourg, PL 33716
	The same of the sa
(Use attachment if necessary)	
ective date is listed, the date mus of filing.)	t be specific and cannot be more than five business days prior to or 90 as not meet the applicable statutory filing requirements, this date will not
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