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#### TRANSMITTAL LETTER

SUBJECT: Law Office of Rhonda E. F	Parnell, LLC
(Nan	ne of Limited Liability Company)
:	
The enclosed Articles of Organization and	ne of Limited Liability Company)  d fee(s) are submitted for filing.
Please return all c	correspondence concerning this matter to the following:
· 1 -	
Rhonda E. Parnell	
	(Name of Person)
	abla
Law Office of Rhonda E. F	Parnell, LLC
	(Firm/Company)
4250 Alafaya Trail, Suite 212-34	48
	(Address)
Oviedo, FL 32765	
	(City/State and Zip Code)
	•
For further information concerning this ma	atter, please call:
Rhonda E. Pamell, Esq.	at ( 407 ) 376-5133
(Name of Person)	(Area Code & Daytime Telephone Number)

STREET ADDRESS:

TO:

Registration Section
Division of Corporations

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

#### ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

### TO SERVICE OF THE PART OF THE **ARTICLE I - Name:** The name of the Limited Liability Company is: Law Office of Rhonda E. Parnell, LLC **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: **Mailing Address:** 4250 Alafaya Trail, Suite 212-348 4654 Aguila Place Orlando, FL 32826 Oviedo, FL 32765 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Rhonda E. Pamell Name 4654 Aguila Place Florida street address (P.O. Box NOT acceptable) Orlando, 32826

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 608, Florida Statutes..

City, State, and Zip

FLORIDA

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGRM** Rhonda E. Parnell 4250 Alafaya Trail, Suite 212-348 Oviedo, FL 32765 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE:

Filing Fees: \$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee

that the facts stated herein are true.)