

LD9000115119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

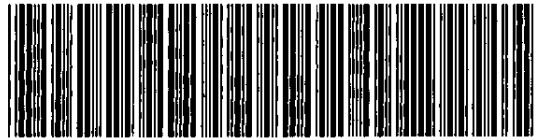
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

DEC 3 2009

EXAMINER

DAVID F. BARDEN
ATTORNEY AT LAW
P.O. BOX 951625
LAKE MARY, FLORIDA
32795-1625

November 30, 2009

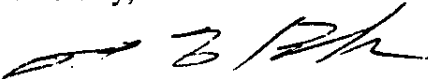
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam,

“Mid Florida Law Group, PLLC” is being formed for the purpose of providing legal services to individuals and organizations

Thank you.

Sincerely,



David F. Barden
Attorney at Law
Tel: 407-580-5876
Fax: 407-218-5070
barndenlaw@aol.com

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Mid Florida Law Group PLLC
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:

David F. Barden
Name of Person

Mid Florida Law Group PLLC
Firm/Company

P.O. Box 951625
Address

Lake Mary, Florida 32795-1625
City/State and Zip Code

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

For further information concerning this matter, please call:

David F. Barden at (**407**) **580-5876**
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
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration 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:

Mid Florida Law Group, PLLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

Purpose (Providing Legal Services)

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

126 Bent Tree Circle
Lake Mary, FL 32746

P.O. Box 951625
Lake Mary, FL 32795-1625

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:

David F. Barden

Name

126 Bent Tree Circle

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

Lake Mary, FL 32746 FL

City, State, and Zip

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TALLAHASSEE, FLORIDA

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, F.S..

David F. Barden

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

David F. Barden

126 Bent Tree Circle


Lake Mary, FL 32746

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 1, 2010 (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.)

REQUIRED SIGNATURE:



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 that the facts stated herein are true.)

David F. Barden

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)