L12000077837

(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:

A. LUNT W12-19468

JUN 12 2011

EXAMINER

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04/05/12--01010--003 **160.00

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2012 JUN 11 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: SHEARD, 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:

JONATHAN SHEARD
Name of Person

Firm/Company

5839 CALADIUM DRIVE
Address

DALLAS, TX 75230-2625
City/State and Zip Code

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

For further information concerning this matter, please call:

JONATHAN SHEARD at (469) 658 5649
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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2012

JONATHAN SHEARD
5839 CALADIUM DRIVE
DALLAS, TX 75230-2625

SUBJECT: SHEARD, LLC
Ref. Number: W12000019468

We have received your document for SHEARD, LLC and your check(s) totaling $160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division s records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is P94000002969.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 912A00011249

JONATHAN SHEARD

JSHEARD@COOKEELAM.COM

18615 NW 23RD STREET, PEMBROKE PINES, FL 33029-5324

TEL: 954 505 4668; FAX: 954 505 4669; CELL: 469 658 5649

FAX MESSAGE

TO: Agnes - Florida S of S, Corporations Division, LLC Department - 850 245 6030
DATE: June 12, 2012
TOTAL PAGES (Including this one): Three
SENDER'S REF: 0612ce01
RECIPIENT'S REF: W12000019468
IF YOU DO NOT RECEIVE ALL PAGES BEING TRANSMITTED, PLEASE TELEPHONE THE SENDER

Agnes,

ALTERNATIVE NAME REQUEST - COOKE ELAM, LLC
ORIGINAL FILING AS SHEARD, LLC

I refer to my earlier filing and our telephone conversation this morning.

As requested I have amended the Articles of Organization to show my Pembroke Pines address and to nominate myself as the Registered Agent.

I look forward to seeing the LLC appear on your website at your earliest convenience and thank you again for your valuable assistance.

With kind regards,

Jonathan Sheard

Jonathan Sheard

RECEIVED
12 JUN 12 PM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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2012 JUN 11 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:
The name of the Limited Liability Company is:

COOKE ELAM, LLC

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

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
18615 NW 23RD STREET	18615 NW 23RD STREET
PEMBROKE PINES	PEMBROKE PINES
FL 33029-5324	FL 33029-5324

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:

JONATHAN EBOR WARWICK SHEARD
Name

18615 NW 23RD STREET

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

PEMBROKE PINES FL 33029-5324

City, State, and 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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	**Name and Address:**
MGRM	JONATHAN EBOR WARWICK SHEARD 18615 NW 23RD STREET PEMBROKE PINES FL 33029-5324

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TALLAHASSEE, FLORIDA

(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.)

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. 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.)

JONATHAN EBOR WARWICK SHEARD
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)