

**L16000082022**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : GRAYROBINSON, P.A. - ORLANDO  
Account Number : I20010000078  
Phone : (407) 843-8880  
Fax Number : (407) 244-5690

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: peter.law@gray-robinson.com

FLORIDA LIMITED LIABILITY CO.  
International Corrections Consultants, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: International Corrections Consultants, LLC

ARTICLE II - Address:

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

2145 Metrocenter Blvd, Suite 350  
Orlando, Florida 32835

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

William A. Boyles  
Name

301 E. Pine St., Ste. 1400  
Florida street address (P.O. Box NOT acceptable)

Orlando, Florida 32801  
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 605, F.S.

William A. Boyles  
Registered Agent's Signature: William A. Boyles

Article IV - Management:

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company.

Lori Costantino-Brown, Manager/Member

By Lori Costantino-Brown  
Lori Costantino-Brown, Manager/Member  
Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), 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.)

Lori Costantino-Brown  
Typed or printed name of signer

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)

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