## L10WU023745

(Re-	questor's Name)			
(Add	dress)			
(Add	dress)			
(City	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nam	ie)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
		:		

Office Use Only



500170965095

03/03/10--01033--016 \*\*160.00

10 MAR -3 ANII: 15

B. KOHR

MAR - 4 2010

EXAMINER

## **COVER LETTER**

TO:	Registration Division of C				ices IIC	
SUBJE	ECT:	Lewis and Turr	ner Cor	sulting Serv	ن ices, LLC	
		Name of Limit	ted Liabilit	y Company	1003, 220	
The en	closed Articles	of Organization and fee(s) are	submitted	for filing.		
Please	return all corres	pondence concerning this mat	ter to the f	ollowing:	,	
	<del>*.</del>	Glad	dys Lewi	s Walton		
		Lewis and Turn	er Cons Firm/Com		, LLC	
				F—.,		
	228 East 9th Street Address					
			/ tuul 0.			
				FL 32206		
			ty/State and	•	not	
•		E-mail address: (to be used	for future ar	ces@comcast.	on)	
For fur	ther information	concerning this matter, pleas	e call:			
		Lewis Walton	_ at (	04)	235-6224	
	Name	of Person	A	rea Code & Daytime	Telephone Number	
Enclos	sed is a check f	or the following amount:				
<b>]</b> \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certi	00 Filing Fee & fied Copy onal 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	F I C 2	treet/Courier Add legistration Section division of Corpora difficition Building 661 Executive Central Building allahassee, FL 323	tions ter Circle	

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY			
ARTICLE I - Name: The name of the Limited Liability Company is:	HAR OF CO			
Lewis and Turner Consult (Must end with the words "Limited Liability	ting Services, LLC by Company," "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
228 East 9th Street Jacksonville, FL 32206	228 East 9th Street  Jacksonville, FL 32206			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ered Agent. You must designate an individual or another			
The name and the Florida street address of the re	egistered agent are:			
Gladys Lewis	s Walton			
Name				
228 East 9th Street				
Florida street address (P.O. Box <u>NOT</u> acceptable)				
Jacksonville, FL 32206 FL City, State, and Zip				
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S			

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 Gladys Lewis Walton 228 East 9th Street Jacksonville, FL 32206 MGRM Gloria J. Turner 2687 Armsdale Road Jacksonville, FL 32218 (Use attachment if necessary) N/A \_\_\_\_\_. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (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:** /s/ GLADYS LEWIS WALTON 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.) Gladys Lewis Walton 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)