Division of Corporations

Page 1 of 2

Division of Corporations Public Access System Katherine Harris, Secretary of State

# Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the ax audit number (shown below) on the top and bottom of all pages of the document.

(((H000000246579)))

Note: DO NOT hit the REFRESH/RELOAD button on your browse from his page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : BIZCORP INTERNATIONAL INC.

Account Number : I19990000093 Phone : (561)776-2277 Fax Number : (561)776-2266

# LIMITED LIABILITY COMPANY

J. EVANS CONSULTING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

(((H00000024657 9)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED L

### ARTICLE I - Name:

The name of the Limited Liability Company is:

J. EVANS CONSULTING

LLC

#### **ARTICLE II - Address:**

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

182 SW 96th Avenue Plantation, FL 333

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

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

Jimmy Evans

Name 182 SW 96th Avenue

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

FL City, State, and Zip

Having been named as registered agent and to accept service of process for the bove stated limited liability company at the place designated in this certificate, I hereby accept the oppointment 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 and amiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

SEE ATTACHED CERTIFICATE

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties perjuty that the facts stated herein are true.)

Stephen Levy (Organizer)

Typed or printed name of signee

Stephen Levy 4400 PGA Boulevard Suite 700 Palm Beach Gardens, FL 33410 (561) 776-2277

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)

(((H00000024657 9))

(((H00000024657 9)))

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.5 , FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY STRAITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTER D **OFFICE/** REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: J. EVANS CONSULTING, LEC
- 2. The name and address of the registered agent and office is:

Jimmy Evans 182 SW 96th Avenue Plantation, FL 33324

Having been named as registered agent and to accept service of process for de above stated limited liability company at the place designated in this certificate, we hereby accept the appointment as registered agent and agree to act in this capacity. We further gree to comply with the provisions of all statutes relating to the proper and complete performance of our duties, and we are familiar with and accept the obligations of our position as registered a ent.

Jimmy Evans

(((H00000024657 9)))