

LO0000014746

K. McBride  
12770 Yankley Dr  
Boca Raton, FL  
33428

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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- ☐ Walk in ☐ Pick up time ☐ Certified Copy  
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NEW FILINGS

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

OTHER FILINGS

- ☐ Annual Report  
☐ Fictitious Name

Name	
Availability	
Examiner	
Under Verifier	
Acknowledgment	
A. P. Verifier	

AMENDMENTS

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

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FF #125  
certs 35

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

McBRIDE FINANCIAL CONSULTING, L.C.

## ARTICLE II - Address:

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

12770 YAROLEY DRIVE  
BOCA RATON, FL 33428

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

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

KEITH McBRIDE	_____
Name	_____
12770 YAROLEY DRIVE	_____
Florida street address (P.O. Box <u>NOT</u> acceptable)	_____
BOCA RATON FL 33428	_____
City, State, and Zip	_____

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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..

x Keith McBride  
\_\_\_\_\_  
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)

x Keith McBride  
\_\_\_\_\_  
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.)

KEITH McBRIDE  
\_\_\_\_\_  
Typed or printed name of signee

### 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)