

L020000006361

00789-00623-00671

2/18

BRADY J. LAWSON

701 WAVECREST DR, W02-5884

MJH

ORLANDO FLORIDA 32807

700005000447--5

-02/25/02--01041--004

****125.00 ****125.00

407-277-2613

407-376-2534 CIELE

FILED

02 MAR 18 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 28, 2002

BRADY J. PAWSON
701 WAVECREST DR.
ORLANDO, FL 32807

SUBJECT: PAWSON SECURITY, LLC
Ref. Number: W02000005884

We have received your document for PAWSON SECURITY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 002A00012420

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pawson Security, LLC

ARTICLE II - Address:

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

701 Wavecrest Dr.
Orlando, FL 32807

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

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

Brady J. Pawson
Name
701 Wavecrest Dr.
Florida street address (P.O. Box NOT acceptable)
Orlando, FL 32807
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.

X 
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, 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 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.)

Brady J. Pawson
Typed or printed name of signee

Filing Fees:

- X \$100.00 Filing Fee for Articles of Organization
- X \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 MAR 18 AM 9:55

FILED