## LOZOOOOO8904 LUCENKO CONSULTING ASSOCIATES, LLO



Larissa Lucenko, MA, MSW, ACSW, President 26140 Hickory Blvd., #601 Bonita Springs, FL 34134 Tel. (239) 992-0119

e mail: lucenkol@yahoo.com

April 8, 2002

Registration Section Division of Corporations PO BOX 6327 Tallahassee, FL 32314

Dear Sir or Madam:

L02 3904

800005235718--5 -04/10/02-01053--005 \*\*\*\*130.00 \*\*\*\*130.00

Enclosed please find our application, together with the fees, for transferring our Company from New Jersey. The payment includes: \$100.00 filing fee, \$25.00 Designation of Registered Agent, and \$5.00 for Certificate of Status.

The IRS Tin Is: 22-3311587.

Our mailing address is PO Box 2625, Bonita Springs, Fl 34133-2625.

If you have any questions, please contact us at the above telephone number.

Very truly yours,

Larissa Lucenko, MA, MSW, ACSW

SECRETARY OF STATE OF

20

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
LUCENKO CONSUlting Associates, LCC	
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limited Liability Compan	y is:
26140 HIGGERY Blud, # GOI	•
BONITA SARINGS, F1 34134	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	
The name and the Florida street address of the registered agent are:	
LARISSA LUCERKO, YRESIDEL	
26/40 Hickory Boolers # 601	·
Marie III and the second territoria.	-
Florida street address (P.O. Box <u>NOT</u> acceptable)  Box 174 Spaints FL 34134  City, State, and Zip	
City, State, and Zip	
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 statutes relating to the proper and complete performance of my duties, and I am familiar with a accept the obligations of my position as registered agent as provided for in Chapter 608, F.S  Registered Agent's Signature	
A.A. INT. N.E. A.C. I. I. CO. II. I. C.	
Article IV - Management (Check box if applicable.)	:53
The Limited Liability Company is to be managed by one manager or more managers and therefore, a manager - managed company.	MSION SECT
元 · · · · · · · · · · · · · · · · · · ·	<u>ス</u> 元 号号マ
o	82
(An additional article must be added if an effective date is requested)	주유 유오
Signature of a member or an authorized representative of a member.	, AA
(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.)	1 <del>Z</del>
LARISTA LUCENTO	
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)	

, ×

**ARTICLE 1 - Name:**