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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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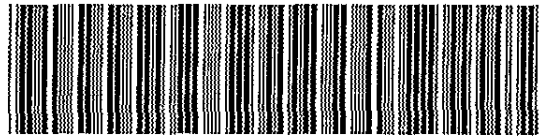
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# PARACLETE MINISTRIES, INC.



March 3, 2003

Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: Filing Articles of Organization (Fla. Limited Liability Co.)  
*PARACLETE EMPLOYEE BENEFITS, LLC.*

Dear Sir:

Enclosed you will find the original Articles of Organization to be filed with your office along with a check for your filing fees of \$125.00.

Thank you for your prompt attention in filing this document.

Sincerely,

David A. Rigby

DR/rc  
Encls.

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TALLAHASSEE, FLORIDA

**DAVID RIGBY, CONSULTANT**

106 SW 9th Street \* Cape Coral, FL 33991 \* Phone (941) 458-4827 \* chloecccc@aol.com

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

PARACLETE EMPLOYEE BENEFITS, LLC.

**ARTICLE II - Address:**

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

106 SW 9th St CAPE CORAL FL 33991

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

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

LINDA RIGBY  
Name

106 SW 9th St.  
Florida street address (P.O. Box **NOT** acceptable)

CAPE CORAL FL 33991  
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.*

Linda Rigby  
Registered Agent's Signature

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

David Rigby  
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.)

DAVID A. RIGBY  
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)