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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: A 1 A CORPORATE SERVICES, INC.

Account Number : 120010000247 Phone

: (305)674-3313

Fax Number

: (305)674-3359

UNISION OF CORPORATION

## LIMITED LIABILITY COMPANY

**BOWIE & ASSOCIATES, LLC.** 

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## ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

## ARTICLE! NAME

The name of the Limited Liability Company is: BOWIE & ASSOCIATES, LLC.

#### ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 1846 NW 1ST PLACE SUITE # 2

MIAMI, FL 33136

## ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REIGSTERED AGENT SIGNATURE

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

**TATTALA BOWIE** 

1646 NW 1ST PLACE SUITE # 2

MIAMI, FL 33136

Having been named as registered agent to accept service of process for the above stated limited tiability 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 statutas relating to the proper and complete performance of my duties, and I am familier with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature TATTALA BOWIE

#### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one member or more members and is, therefore a, member – managed company.

### ARTICLE V MEMBERS (optional)

Managing Member:

TATTALA BOWIE

P.O. BOX 83396

**CONYERS, GA 30013** 

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Signature of a member or an authorized representative of a member.

(in accordance with section 605.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penables of parjury that the facts stated herein are true.

TATTALA BOWIE

Typed or printed name of signes

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