

L03 000029993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

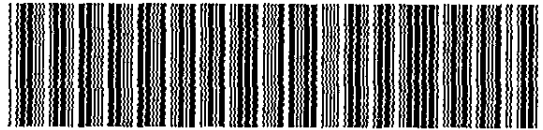
(Document Number)

Certified Copies ☒

Certificates of Status ☒

Special Instructions to Filing Officer:

Office Use Only



700022236377

08/13/03--01013--013 **160.00

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

03 AUG 13 PM 1:30

RECEIVED
03 AUG 13 PM 1:38

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

L03-29993
Q

Seed Word Communications Ltd. Co.

1833 Halstead Blvd, Suite 712, Tallahassee, FL 32309

Contact: Dr. Joseph K. Amanfu, PMP, CCP, MBCS, CTM, Ph.D. (850) 893-9781

August 13, 2003

TO: Registration Section
Division of Corporations
409 Gaines Street
Tallahassee, FL 32399

Re: ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Sirs,

Please see enclosed Articles of Organization for "Seed Word Communications Ltd. Co."

Seed Word Communications Ltd. Co. is being formed as a "Manager-Managed Company" to perform the following functions:

1. Publishing and normal publishing-related activities
2. Conference Speaking
3. Providing Instruction and Coaching in Public Speaking
4. Project Management Consulting & Project Management Training

I have enclosed total filing fees of one hundred and sixty dollars (\$160.00).

Sincerely,

Joseph Amanfu
Dr. Joseph K. Amanfu

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 AUG 13 PM 1:39

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Seed Word Communications Ltd. Co.

ARTICLE II - Address:

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

1833 Halstead Blvd, Suite 712
Tallahassee, FL 32309

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

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

DR. JOSEPH K. AMANFU
Name
1833 Halstead Blvd, Suite 712
Florida street address (P.O. Box **NOT** acceptable)
Tallahassee FL 32309
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..

Joseph Amanfu
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)

Joseph Amanfu
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.)

Dr. Joseph K. Amanfu
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 AUG 13 PM 1:39