L03000045035

(Re	equestor's Name))
(Ad	ldress)	
, (Ad	dress)	
·		
(Cit	y/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	-
		j
		

Office Use Only



100024086891

10/29/03--01066--017 **160.00



U03-32325 J. MYAN NOV 3 2003

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: O'Toole Partnership, L.b.C BCT CONSUltants LLC (Name of Limited Liability Company)
(Mante of Emilion Emoliny Company)
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Bartholomew F. O'Toole (Name of Person)
Please return all correspondence concerning this matter to the following:
Bartholomew F. O'Toole
(Name of Person)
O'Toole Partnership, L.L.C.
(Firm/Company)
23516 Sandycreek Terrace #204
(Address)
Bonita Springs, Florida 34135
(City/State and Zip Code)
For further information concerning this matter, please call:
Bartholomew (Bart) F. O'Toole at (239) 826-8943

STREET ADDRESS: Registration Section

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

(Name of Person)

MAILING ADDRESS:

(Area Code & Daytime Telephone Number)

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



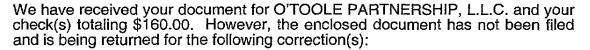
FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 4, 2003

BARTHOLOMEW F. O'TOOLE O'TOOLE PARTNERSHIP, L.L.C. 23516 SANDYCREEK TERRACE #204 BONITA SPRINGS, FL 34135

SUBJECT: O'TOOLE PARTNERSHIP, L.L.C.

Ref. Number: W03000032325



The name of the entity cannot include "PARTNERSHIP." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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) 245-6043.

Letter Number: 803A00059906

Joey Bryan Document Specialist Man Charles Man Charles Con Ch

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Tayon Alland	ALC:
	OST OF STATE

ARTICL	E	I -	Name:
--------	---	-----	-------

The name of the Limited	Liability	Company	is
-------------------------	-----------	---------	----

O-Toole Partnership, L.L.C. BOT Consultants LLC

Bartholomew F. O'Toole

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
23516 Sandycreek Terrace #204	23516 Sandycreek Terrace #204
Bonita Springs, Florida 34135	Bonita Springs, Florida 34135

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

	Name		<u></u>
23516 Sandycreek Ter	rrace #204	,	**
Florida street addr	ess (P.O. Bo	x <u>NOT</u> accep	table)
Bonita Springs	1	FLORIDA	34135

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

<u>Fitle:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address: Bartholomew F. O'Toole	
MGRM	Bartholomew F. O'Toole	200
	23516 Sandycreek Terrace #204	69
	Bonita Springs, Florida 34135	Mos
MGR	Jodi M. O'Toole	
Mait	23516 Sandycreek Terrace #204	***
	Bonita Springs, Florida 34135	
Use attachment if necessary)		~ 1
	et be added if an effective date is requested.	

\$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)

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.)

Typed or printed name of signee

Bartholomew (Bart) F. O'Toole