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1 BRYAN FEB 20 2004

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## TRANSMITTAL LETTER

SUBJECT:		Kerygma Netv	vorking			The state of the s
SOBOLE I.		of Limited Lia		pany)		多人
The enclosed Artic	cles of Organization and fo	ee(s) are submi	ited for fill	ng.		The state of the s
	Please return all cor	respondence co	oncerning	his matter to the follow	owing:	THE RESERVENCE OF THE PARTY OF
_			C. Fields			A A A A A A A A A A A A A A A A A A A
		(Name	of Person)			
, <u>.</u>			Network	ng		
		(Firm/	Company)			
		PO Box	680663		<u> </u>	
		(Ac	idress)			
_		Orlando, Fl				•
		(City/State	and Zip Co	de)		
For further inform	ation concerning this matt	er, please call:				
Ro	obert C. Fields	at (_	407	_)_383-0612		
(	Name of Person)		(Area Co	de & Daytime Telephor	ne Number)	

STREET ADDRESS:

TO:

Registration Section Division of Corporations

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

MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 26, 2004

ROBERT C. FIELDS KERYGMA NETWORKING PO BOX 680663 ORLANDO, FL 32868-0663

SUBJECT: KERYGMA NETWORKING

Ref. Number: W04000008011

We have received your document for KERYGMA NETWORKING and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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.

Joey Bryan Document Specialist

Letter Number: 404A00012901

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ART	<b>ICL</b>	ΕI	- Na	me:
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The name of the Limited Liability Company is:

Kerygma Networking, L.L.C.			
	 	A CONTRACTOR OF THE PARTY OF TH	 

## **ARTICLE II - Address:**

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

Principal Office Add	lress:	Mailing Address:
7608 Gramercy Drive		PO Box 680663
Orlando, Fl 32818		Orlando, FI 32868-0663
3018 Mad 2014 - 14-4 Annah Mad Mad Annah		
	istered Agent, Registered Orida street address of the regi	ffice, & Registered Agent's Signatur stered agent are:
	Robert C. Fields	6
<del></del>	Name	
	7608 GRAMERCY D	PRIVE
	Florida street address (P.O. B	ox NOT acceptable)
	ORLANDO	FLORIDA 32868

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..

City, State, and Zip

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

<b>b</b>		
	naging Member(s): ager or Managing Member is as follows:  Name and Address:  Robin J. Fields 7608 Gramercy Drive Orlando, Fl 32818	
	2	
ARTICLE IV- Manager(s) or Ma	naging Member(s):	
The name and address of each Man	ager or Managing Member is as follows:	
77241	Name and Address	
<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member	in the second se	
MGR	Robin J. Fields	
	7608 Gramercy Drive	
	Orlando, FI 32818	
MGRM	Robert C. Fields	
	7608 Gramercy Drive	
	Orlando, Fl 32818	
	· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)		
NOTE: An additional article mu	st be added if an effective date is requested.	
REQUIRED SIGNATURE:		
	$\alpha$ 1:	
Lobert	( tules	
Signature of a member o	an authorized representative of a member.	
	n 608.408(3), Florida Statutes, the execution s an affirmation under the penaltics of perjury	
	,	
	Robert C. Fields	

Filing Fees:

\$100.00 Filing Fee for Articles of Organization S 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee