

L 05000001378

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

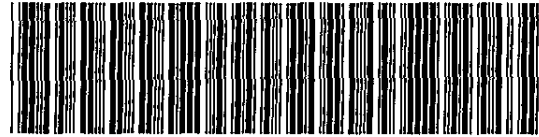
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

BK

Office Use Only



900043887259

01/05/04--01/05/04 \*\$190.00

EFFECTIVE DATE  
12/31/04

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

05 JAN -5 PM 2:26

FILED



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 123985 10991A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : January 5, 2005

ORDER TIME : 9:22 AM

ORDER NO. : 123985-005

CUSTOMER NO: 10991A

CUSTOMER: A. Faxon Henderson, Jr., Esq  
A. Faxon Henderson, Jr.

Suite 206  
12773 W. Forest Hill Blvd.  
Wellington, FL 33414

DOMESTIC FILING

NAME: A. FAXON HENDERSON, JR.  
PROFESSIONAL LIMITED  
LIABILITY COMPANY

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS: \_\_\_\_\_

EFFECTIVE DATE  
12/30/04  
05 JAN -5 PM 2:26  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE  
12/30/04  
05 JAN - 5 PM 2:26  
FILED  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

ARTICLES OF ORGANIZATION  
OF  
A. FAXON HENDERSON, JR. PROFESSIONAL LIMITED LIABILITY COMPANY

The undersigned member, for the purpose of forming a professional limited liability company (the "limited liability company") under the provisions of Chapters 608 and 621, Florida Statutes, hereby adopts the following Articles of Organization.

ARTICLE I  
NAME OF LIMITED LIABILITY COMPANY

The name of this limited liability company is A. Faxon Henderson, Jr. Professional Limited Liability Company.

ARTICLE II  
EFFECTIVE DATE

The existence of this limited liability company begins on December 30, 2004.

ARTICLE III  
PRINCIPAL OFFICE

The mailing address and street address of the principal office of this limited liability company is 12773 West Forest Hill Boulevard, Suite 206, Wellington, Florida 33414.

ARTICLE IV  
AREAS OF PRACTICE

The areas of practice of this limited liability company are providing general legal services and any other lawful business that may be engaged in by a professional limited liability company organized under Florida law that provides such services, as such activities may be determined by the member from time to time.

ARTICLE V  
REGISTERED OFFICE AND AGENT

The name and street address of this limited liability company's initial registered agent for service of process in the State of Florida is:

A. Faxon Henderson, Jr.	12773 West Forest Hill Boulevard, Suite 206 Wellington, Florida 33414.
-------------------------	---

ARTICLE VI  
MANAGEMENT

This limited liability company will be a member-managed company.

ARTICLE VII  
PERIOD OF DURATION

This limited liability company shall have perpetual existence.

4<sup>th</sup> The undersigned member has executed these Articles of Organization this  
day of January, 2005.



A. Faxon Henderson, Jr., Member

CERTIFICATE PURSUANT TO SECTION 608.408(3) OF  
THE FLORIDA LIMITED LIABILITY COMPANY ACT

On January 4, 2005, the undersigned member of A. Faxon Henderson, Jr. Professional Limited Liability Company has executed this Certificate to constitute an affirmation by the undersigned, under the penalties of perjury, that the facts stated in the foregoing Articles of Organization are true.



A. Faxon Henderson, Jr., Member

STATEMENT OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

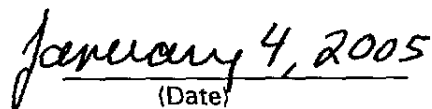
PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the professional limited liability company is: A. Faxon Henderson, Jr. Professional Limited Liability Company
2. The name and street address of the registered agent and office is:

A. Faxon Henderson, Jr.  
12773 West Forest Hill Boulevard, Suite 206  
Wellington, Florida 33414

*Having been named as registered agent and to accept service of process for the above-named 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.*

  
A. FAXON HENDERSON, JR.

  
(Date)