## L050600/5519

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SECRE MARY C	F STATE FLOATBA
(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:	
205-4944	
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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

FILED

2005 FEB 14 P 12: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

January 31, 2005

CARL JULIUS BEACHAM, III 1709 THOMAS AVE. CHARLOTTE, NC 28205

SUBJECT: FULCRUM ARCHITECTURE

Ref. Number: W05000004944

We have received your document for FULCRUM ARCHITECTURE and your check(s) totaling \$130.00. 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."

The specific purpose of the entity must be set forth in the document.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 305A00006764

January 16, 2005

## FILED

2005 FEB 14 P 12: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Division of Corporations To:

Registration Section

PO Box 63

Tallahassee, FL 32314

Fr:

Carl Julius Beacham, III 1709 Thomas Avenue

Charlotte, NC 28205

Home Phone: 704/335-1293

Mobile Phone: 704/641-9256

Re:

Submitting for Articles of Incorporation

New business

The following business is registering with the Division of Corporations for Articles of Incorporation for a Professional Limited Liability Company;

"Fulcrum Architecture, PLLC"

If you have any questions please contact me at the above address or phone number

Thank you!

1321 Edgewater Dr., Suite 2, Orlando, Fla. 32804

FILED

2005 FEB 14 P 12: 17

February 7, 2005

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fla. 32314

Re:

Fulcrum Architecture, L.L.C. Ref. # W05000004944

Sir or Madam,

Please find the attached revised Articles Of Organization for Fulcrum Architecture, L.L.C. We have modified the name as requested to include "L.L.C." Please reprocess this application with the check that was previously sent.

If you have any questions or concerns, feel free to contact me at 704-641-9256.

Sincerely,

Carl J. Beacham, AIA

## FILED

	ORIDA LIMITED LIABIEITE COMBANY
ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
FULCRUM ARCH	ITECTORE, L.L.C.
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
SAME >	1321 EDGEWATER DRIVE SUITE OFLANDO, FLA 32804
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	egistered agent are:
ROGTER MANIE	Σ <b>Υ</b>
	PR .PPI LE SVITE 2 ress (P.O. Box NOT acceptable)
	FL 32804 nd Zip
~ 1 ~ 1 · 1 · 1 · 1 · 1	
City, State, a	nd Zip

(CONTINUED)

ARTICLE IV- Manager(s) or Managi		
The name and address of each Manager	or Managing Member is as follows:	FILED
<u>Title:</u>	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		2005 FEB 14 P 12: 17
140		SECRETARY OF STATE
MGR -	TROOTER MANLEY IT!	SECRETARY OF STATE NLLAHASSEE, FLORIDA
	LOUD BAPUS	05
alco. A		<u> </u>
MYKM	CARL J. Brachard III	<u>-</u>
	CHARLOTTE NC 2820	,5
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is reque	ested.
REQUIRED SIGNATURE:		
1.1 (m. 11/2)	M	
Signature of a member o	r an authorized representative of a memi	ber.
(In accordance with section of this document constitut	n 608.408(3), Florida Statutes, the executions an affirmation under the penalties of perj	n jury
that the facts stated here	in are true.)	·
T. Roger Typed	MANUTY II or printed name of signee	
Filing Fees:		

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)