

L05000019941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

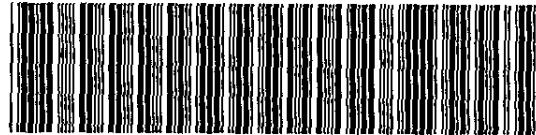
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name	
Availability	
Examiner	DDO
Updated	
Updated	
Ver. A. 1	
Admin. Comment	DDO
W. P. Verifier	DDO

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SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 02/25/05 BY 1018

2005 FEB 25 P 3:32

1018

**Moses E. Williams
2355 Foxboro Way
Tallahassee, FL 32309**

February 24, 2005

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

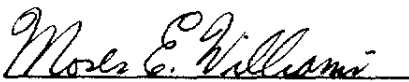
Re: Williams, Jacobs & Associates
Subject: Florida Limited Liability Corporation Filing

Dear Sir or Madam:

I have attached the articles of organization, statement accepting appointment as registered agent and operating agreement for Williams, Jacobs, & Associates. You will also find enclosed a \$125.00 filing fee check made payable to the Department of State, Division of Corporations.

I look forward to hearing from you soon.

Sincerely,



Moses E. Williams
Phone/Fax: (850) 894-2045
Mobile: (850) 322-4994
Moses.Williams@comcast.net

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF ORGANIZATION OF
WILLIAMS, JACOBS & ASSOCIATES, LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is **Williams, Jacobs & Associates, LLC:**

ARTICLE II — Address:

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

P.O. Box 1101
Tallahassee, Florida 32302

ARTICLE III — Registered Agent and Registered Office

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

Moses Williams, Esq.
2355 Foxboro Way
Tallahassee, Florida 32309

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of the members and acknowledged them to be my act this 12th day of January, 2005.



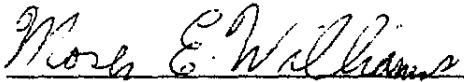
Signature of authorized representative
Moses Williams
Tallahassee, Florida

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2005 FEB 25 P 3:32

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STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 608, Florida Statutes.



Signature of Registered Agent

Moses Williams
.2355 Foxboro Way
Tallahassee, Florida 32309

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SECRETARY OF STATE
-TALLAHASSEE, FLORIDA-