

L05000020745

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000050915 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

eagle consulting services, l.l.c.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

H05000050915

(1)
ARTICLES OF ORGANIZATION
OF
EAGLE CONSULTING SERVICES, L.L.C.

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I: NAME

The name of the limited liability company shall be EAGLE CONSULTING SERVICES, L.L.C. ("Company").

ARTICLE II: ADDRESS

The mailing address and street address of the principal office of the company shall be:

c/o Paul Haralson, Esquire
8300 N.W. 53rd Street
Suite 300
Doral, Florida 33166

ARTICLE III: REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the State of Florida is:

Paul Haralson, Esquire
BERMUDEZ, HARALSON & TOME, LLP
8300 N.W. 33 Avenue
Suite 300
Doral, Florida 33166

IN WITNESS WHEREOF, the undersigned organizers in accordance with Fla.Stat. 608.408(3), have made and subscribed these Articles of Organization at Miami-Dade County, Florida, on this 28th day of February, 2005.



Name of Organizer: Jay R. Tome, Esquire

H05000050915

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me this 28th day of February, 2005, by
Jay R. Tome, Esquire.

Notary Public – State of Florida

Print, Type or Stamp
Commissioned Name of Notary Public

Personally Known ___ OR Produced Identification

Type of Identification Produced _____

(SEAL)

FILED
05 MAR - 1 AM 9:42
TALLAHASSEE, FLORIDA

H05000050915

CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

Under the provisions of F.S. 608.415 or 608.507, Eagle Consulting Services, LLC, submits the following statement to designate a registered office and registered agent in the State of Florida:

1. The name of the limited liability company is Eagle Consulting Services, LLC.
2. The name and street address of the registered agent in Florida are:

Paul Haralson, Esquire
Bermudez, Haralson & Tome, LLP
8300 N.W. 53rd Street
Suite 300
Miami, Florida 33166

The undersigned, being the person named in the articles of organization of Eagle Consulting Services, LLC, as the registered agent of this limited liability company, hereby consents to accept service of process for the above-stated company at the place designated in the articles of organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.

Registered Agent


Paul Haralson, Esquire

FILED
05 MAR - 1 AM 9:42
TALLAHASSEE, FLORIDA

H05000050915