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SECRETARY OF STATE

### TRANSMITTAL LETTER

PO: Registration Section Division of Corporations
SUBJECT: BUSINESS MANAGEMENT SOLUTIONS PLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Theresa M Henson
(Name of Person)
BUSINESS MANAGEMENT SOLUTIONS PLC
(Firm/Company)
6501 69th Avevenue N
(Address)
Pinellas Park, Florida 33781
(City/State and Zip Code)
For further information concerning this matter, please call:
Theresa M Hensonat (_727) 430-8738
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
☐ \$125.00 Filing Fee Ø \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
(additional copy is ciclosed)
STREET ADDRESS:  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

## 'ARTICLES OF ORGANIZATION FOR FLORIDA PROFESSIONAL LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

BUSINESS MANAGEMENT SOLUTIONS PLC

#### **ARTICLE II - Address:**

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

Principal Office Address:

6501 69th Ave N. Pinellas Park, Florida 33781

Mailing Address:

6501 69th Ave N. Pinellas Park, Florida 33781

#### ARTICLE III - Registered Agency

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

Theresa M Henson 6501 69<sup>th</sup> Ave N.,

Pinellas Park, Florida 33781

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, F.S.

Signature of Registered Agent

ARTICLE IV – Management:
(Check the appropriate box)

☐ The Limited Liability Company is to be a manger-managed company.

X The Limited Liability Company is to be managed by the members.

Managing Member

Theresa M Henson 6501 69<sup>th</sup> Ave N, Pinellas Park, Florida 33781

#### ARTICLE V - Professional Limited Liability Company

This Limited Liability Company shall be a Professional Limited Liability Company under Florida statutes Chapter 621. The business of the company is limited to the one profession of Certified Public Accounting and no person or entity shall be admitted as a member unless he or she or it is qualified to practice this profession. Further, no interest can be sold except to someone so qualified.

Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Theresa M Henson

Filing Fee: \$125.00 for Articles

SECRETARY OF STATE