

L 050000 85440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

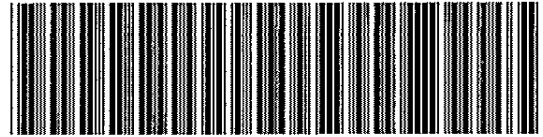
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Smith/Lentz Architecture +
Planning, LLC*

File 2nd

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

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- ____ Art of Inc. File _____
- ____ LTD Partnership File _____
- ____ Foreign Corp. File _____
- ☒ L.C. File _____
- ____ Fictitious Name File _____
- ____ Trade/Service Mark _____
- ____ Merger File _____
- ____ Art. of Amend. File _____
- ____ RA Resignation _____
- ____ Dissolution / Withdrawal _____
- ____ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- ☒ Photo Copy _____
- ____ Certificate of Good Standing _____
- ____ Certificate of Status _____
- ____ Certificate of Fictitious Name _____
- ____ Corp Record Search _____
- ____ Officer Search _____
- ____ Fictitious Search _____
- ____ Fictitious Owner Search _____
- ____ Vehicle Search _____
- ____ Driving Record _____
- ____ UCC 1 or 3 File _____
- ____ UCC 11 Search _____
- ____ UCC 11 Retrieval _____
- ____ Courier _____

ARTICLES OF ORGANIZATION OF
SMITH / LENTZ ARCHITECTURE & PLANNING, LLC

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ARTICLE I
NAME OF COMPANY

The name of the Limited Liability Company is:

SMITH / LENTZ ARCHITECTURE & PLANNING, LLC

ARTICLE II
ADDRESS

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

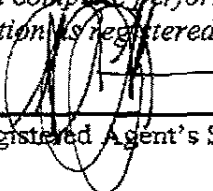
35095 U.S. Hwy. 19 N., Suite 103
Palm Harbor, FL 34684

ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S
SIGNATURE

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

H. JAMES LENTZ, ESQ.
35095 U.S. Hwy. 19 N., Suite 101
Palm Harbor, FL 34684

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated on 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.



Registered Agent's Signature

**ARTICLE IV
MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

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

DATED: August 29, 2005



H. JAMES LENTZ
Managing Member

DATED: August 29, 2005



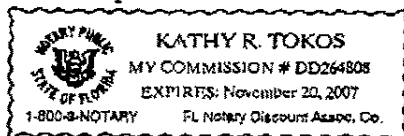
JEFFERY W. SMITH
Managing Member

STATE OF FLORIDA
COUNTY OF PINELLAS

Before me personally appeared H. JAMES LENTZ and JEFFERY W. SMITH, who are known to me to be the persons who executed the foregoing Articles of Organization on behalf of Smith / Lentz Architecture & Planning, LLC.

In witness whereof, I have hereunto set my hand and seal on this 29th day of August, 2005.

My Commission Expires:



Kathy R. Tokos

Notary Public-State of Florida

Printed Name