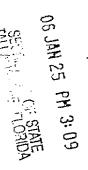


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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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##/25/U6- U1U18--U11 **125.00



FILE

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Pews	Consulting, LLC					
		d Liability Comp	any)	-		
The enclosed Articles of	Organization and fee(s) are s	submitted for filin	g.			
Please return all correspondent	ondence concerning this matte	er to the following	ž:			
James R.	Pews					
· · · · · · · · · · · · · · · · · · ·	(Name of Person)				_
Pews Cor	sulting, LLC					
		(Firm/Company)				_
7744 Gar	dner Dr. #202				三 _代	30
		(Address)			76-	JAN 25
Naples, F	FL 34109					25
· · · · · · · · · · · · · · · · · · ·	(City	/State and Zip Code	e)		1119	- P
For further information of	concerning this matter, please	call:			STATE	PM 3: 09
James R. Pews	5	at (239	287-29	55		
(Name	of Person)	(Area Cod	e & Daytime Te	lephone Number)		
Enclosed is a check for	the following amount:					
✓ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Fi		\$160.00 Fil		-
	Certificate of Status	Certified Copy (additional copy		Certificate of S Certified Copy (additional copy is	y	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporation uilding ecutive Center ee, FL 32301	is		

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ICI	\mathbf{H}	T _	Na	me:
ΔN		1 1	_	17.7	

The name of the Limited Liability Company is:

Pews Consulting, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

aples, FL 34109
Marie Trans
188
1

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

James R.	Pews
	Name
7744 Gai	rdner Dr. #202
	Florida street address (P.O. Box NOT acceptable)
Naples,	_{FL} 34109
	City, State, and Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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1	-	•

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member				
MGRM	James R. Pews			
ج- جر ج- ج	7744 Gardner Dr. #202	=	F	•
* **	Naples, FL 34109			
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(Use attachment if necessary)		, <u>S</u>	P	•
ARTICLE V: Effective date, if other than the		OP SE	ين Alay	
(If an effective date is listed, the date must be to or 90 days after the date of filing.)	e specific and cannot be more than five bu	ısiness'da	ys pri	or

Name and Address:

REQUIRED SIGNATURE:

"MGR" = Manager

Signature of a member or an authorized representative of a member.

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

James R. Pews

Typed 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)