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PICK-UP	[] WAIT	MAIL
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Certified Copies	Certificates of	Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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DIVISION (ASSESSMENT)



COVER LETTER

TO: Registration Secti Division of Corpo					
SUBJECT: J. BENT	TLEY & ASSOCIA				
	(Name of Limited	Liability Compan	ıy)		
The enclosed Articles of O	organization and fee(s) are su	bmitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
JAMES P.					
	(t	Vame of Person)			
J. BENTLE	Y & ASSOCIAT	ES, LLC			
	(I)	Firm/Company)			_ _ _
415 SOUT	HWEST BEAU	IFORD PL	LACE		~
		(Address)			2005 FEP
LAKE CIT	Y, FLORIDA 3	2024			
	(City/	State and Zip Code)			0
For further information cor	ncerning this matter, please o	eall:			2 10 PH 1:46
			445.00-		1:45
JAMES BENTLE		W	415-877	lephone Number)	
(11111110 01	1 01002)	(* 11.00 0.000			
Enclosed is a check for t	he following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 File Certified Copy (additional copy is		\$160.00 Filing F Certificate of Status Certified Copy (additional copy is enclosed)	&
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registratio Division o Clifton Bu 2661 Exec	f Corporation	as	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
J. BENTLEY & ASSOCIATES, LLC (Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
415 SOUTHWEST BEAUFORD PLACE LAKE CITY, FLORIDA 32024	415 SOUTHWEST BEAUFORD PLACE LAKE CITY, FLORIDA 32024
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature:
The name and the Florida street address of the re-	gistered agent are:
JAMES P. BENTLEY	
Name	
415 SOUTHWEST BEAL Florida street address	UFORD PLACE ess (P.O. Box NOT acceptable)
LAKE CITY	FL 32024

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..

City, State, and Zip

(CONTINUED)
Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing Memb	Name and Address: er
MGRM	JAMES P. BENTLEY 415 SOUTHWEST BEAUFORD PLACE LAKE CITY, FLORIDA 32024
ffective date is listed, the date	than the date of filing: (OPTION must be specific and cannot be more than five business d
LE V: Effective date, if other	than the date of filing: (OPTION must be specific and cannot be more than five business d
LE V: Effective date, if other iffective date is listed, the date days after the date of filing.) REQUIRED SIGNATURE: Signature of a coordance of the date of th	than the date of filing: (OPTION must be specific and cannot be more than five business d

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)