

LD60000 26816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

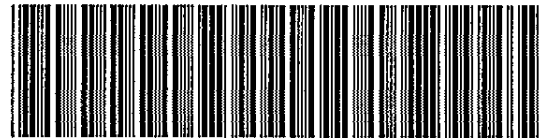
(Business Entity Name)

(Document Number)

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06 MAR - 8 AM 11:33
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FLORIDA

ANDREWS, DAVIS & SUTTON

ATTORNEYS AT LAW

THE PROFESSIONAL BUILDING

694 BALDWIN AVENUE, SUITE 1

POST OFFICE BOX 705

DeFuniak Springs, Florida 32435

ANGUS G. ANDREWS

MARK D. DAVIS

GLEND A K. SUTTON

TELEPHONE (850) 892-5838

FACSIMILE (850) 892-5837

February 9, 2006

Registration Section
The Department of State
Division of Corporation
P. O. Box 6327
Tallahassee, Florida 32314

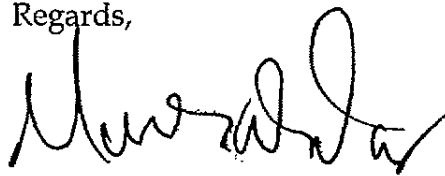
Re: *Pendarvis & Associates Consulting, LLC*
Effective as of February 1, 2006

Dear Division of Corporation:

Enclosed is an original and one copy of the above referenced Articles of Organization. Please return a certified copy and certificate of status to the above address. Enclosed is a check in the amount of \$ 160.00 for the filing fee and certifications.

Thank you for your prompt attention to this matter. If you have any questions or concerns, please do not hesitate to contact me.

Regards,



Mark D. Davis
Andrews, Davis & Sutton

MDD.sjd

Enclosure(s)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pendarvis & Associates Consulting, LLC
(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:

Mark D. Davis

(Name of Person)

Andrews, Davis & Sutton, Attorneys at Law

(Firm/Company)

694 Baldwin Avenue, Ste 1

(Address)

DeFuniak Springs, Florida 32435

(City/State and Zip Code)

06 MAR - 8 AM 11:33
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Mark D. Davis

(Name of Person)

at (850) 892-5838

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

COPY

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pendarvis & Associates Consulting, 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 principal office of the Limited Liability Company is:

Principal Office Address:

11741 Sand Castle Lane
Panama City Beach, FL 32407

Mailing Address:

Post Office Box 6275
Destin, Florida 32550

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

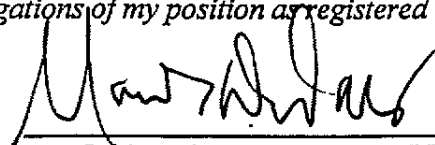
The name and the Florida street address of the registered agent are:

Mark D. Davis, Andrews, Davis & Sutton
Name

694 Baldwin Avenue, Suite 1
Florida street address (P.O. Box NOT acceptable)

DeFuniak Springs FL 32435
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

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

David M. Pendarvis
11741 Sand Castle Lane
Panama City Beach, FL 32407

MGR

Jennifer P. Pendarvis
11741 Sand Castle Lane
Panama City Beach, Florida 32407

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: February 1, 2006 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

David M. Pendarvis

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)