

LO6000038587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

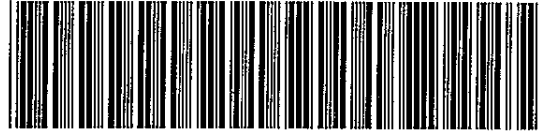
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LO6-38587
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 21, 2006

STAFFORD SHEALY
3172 FORD ROAD
LAKE WORTH, FL 33461

SUBJECT: SHEALY & ASSOCIATES, LLC
Ref. Number: W06000013562

We have received your document for SHEALY & ASSOCIATES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Limited liability companies are either member-managed or manager-managed, not both. Member-managed companies are managed by the members of the limited liability company. Manager-managed companies are managed by non-members. Please amend your document to reflect either the limited liability company is member-managed or manager-managed. If the limited liability company is member-managed, list the names and addresses of the members who will manage the company and identify them solely as managing members. If the limited liability company is manager-managed, list the names and addresses of the non-members who will manage the company and identify them solely as managers. You cannot list both managers and managing members.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 206A00019207

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Shealy & Associates, LLC
3172 Ford Road,
Lake Worth, FL 33461
Phone: 561.502.3120

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

Articles of Organization Cover Letter

The following Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

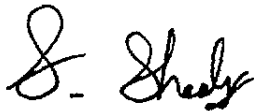
Shealy & Associates, LLC
Stafford Shealy
3172 Ford Road,
Lake Worth, FL 33461

If you have any questions please contact:
Stafford Shealy
561-502-3120

I have enclosed a check for the following items:

Certificate of Status:	\$ 5.00
Certified Copy of Record:	\$ 30.00
New LLC & Reg. Agent:	<u>\$125.00</u>
Total Fees:	\$160.00

Sincerely,



Stafford Shealy

2005 APR 12 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Shealy & Associates, LLC
954 Flamango Lake Dr.
W. Palm Bch, FL 33406
Phone: 561.502.3120

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

Articles of Organization Cover Letter

The following Articles of Organization are **resubmitted** for filing (see enclosure).

Please return all correspondence concerning this matter to the following:

Shealy & Associates, LLC
Stafford Shealy
954 Flamango Lake Dr.
W. Palm Bch, FL 33406

If you have any questions please contact:
Stafford Shealy
561-502-3120

The following items have been paid for:

Certificate of Status:	\$ 5.00
Certified Copy of Record:	\$ 30.00
New LLC & Reg. Agent:	<u>\$125.00</u>
Total Fees Already Paid:	\$160.00

Sincerely,



Stafford Shealy

2005 APR 12 PM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION OF LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is: Shealy & Associates, LLC

ARTICLE II – Address:

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

Principal Office Address & Mailing Address
954 Flamango Lake Dr., West Palm Beach, FL 33406

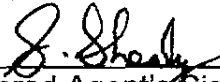
ARTICLE III –

Registered Agent, Registered Office, & Registered Agent's Signature:

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

Name: Stafford Shealy
Address: 954 Flamango Lake Dr., West Palm Beach, FL 33406

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

ARTICLE IV – Managing Member(s):

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

<u>Title</u>	<u>Name</u>	<u>Address</u>
MGRM	Stafford Shealy	954 Flamango Lake Dr., W. Palm Bch, FL 33406
MGRM	Angie Shealy	954 Flamango Lake Dr., W. Palm Bch, FL 33406

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 10th day of April, 2006



Stafford Shealy

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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