LD600067806

(Requestor's Name)				
Rathleen Chiner Bookkeeping Services 3216 Tanglewood Drive Sarasota, Florida 34239				
(City/S	State/Zip/Phone #			
(Oity/c	m	•		
PICK-UP	☐ WAIT	MAIL		
(Busin	ess Entity Name)			
(230)	ooo Enary Hume,			
(Docu	ment Number)			
Certified Copies	Certificates of	Status		
Special Instructions to Fili	ng Officer:			
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	IC	LF.	1 -	Nar	ne:

The name of the Limited Liability Company is:

KATHLEEN MINER BOOKKEEPING SERVICE, LLC

ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liabi	inter Company is:
Principal Office Address:	Mailing Address:	AHAA
311 MAGELLAN OR. SARASOTA, FL 34243	311 MAGELLAW OR SALASOTA, FL 34243	RY CF ST
ARTICLE III - Registered Agent, Regi	istered Office, & Registered Agent's Si	20 20
The name and the Florida street address of	of the registered agent are:	
KATHLI	EEN MINER	

Name

311 MAGELLAW DR

Florida street address (P.O. Box NOT acceptable)

SALASOTA FL 34343

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

(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:	RY OF STATI			
MGAM	KATHLEEN MINER 311 MAGELLAW DR SARASOTA, FL 34243				

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

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)