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COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: Foster Blackmon Financial Solutions, 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: Judy Foster (Name of Person) (Firm/Company) 61-A Dune Breeze Lane, Santa Rosa Beach, FL 32459 For further information concerning this matter, please call: Roger T. Minor _{at (} 713) 461.5900 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: ☑ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & □ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street/Courier Address Mailing Address Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Foster Blackmon Financial Solutions, LL Must end with the words "Limited Liability Company, "Limit	
ARTICLE II - Address: The mailing address and street address of the particle.	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
S1-A Dune Breeze Lane Santa Rosa Beach, FL 32459 ARTICLE III - Registered Agent, Registered	61-A Dune Breeze Lane Santa Rosa Beach, FL 32459 Office, & Registered Agent's Signature:
The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the I	registered agent are:
Judy Foster	ASSEE
Name	SEE, T
61-A Dune Breeze Lan	<u> </u>
Florida street add	e dress (P.O. Box NOT acceptable) RESTATE AM 10: 39
Santa Rosa Beach, FL 3245	9 FL
City, State, a	and Zio

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

Title: "MGR" = Manager "MGRM" = Managing Men	Name and Address:
MGRM	Judy Foster
	61-A Dune Breeze Lane
	Santa Rosa Beach, FL 32459
MGRM	Audrey Blackmon
	61_a Dune Breeze Lane
	Santa Rosa Beach, FL 32459
(Use attachment if necessary	y)
	•
LE V: Effective date, if other	er than the date of filing: (OPTIONAL)
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\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

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