

LO60000089801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

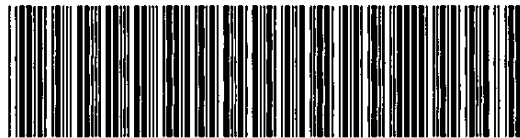
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 SEP 11 PM 4:06

**Laura J. Thomas**

1843 25<sup>th</sup> Av  
Vero Beach, FL 32960  
(772) 299-7326

September 6, 2006

Registration Section  
Division of Corporation  
PO Box 6327  
Tallahassee, FL 32314

**Subject: Allow Me (to do it for you), LLC**

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laura J. Thomas  
Allow Me (to do it for you), LLC  
1843 25<sup>th</sup> Av  
Vero Beach, FL 32960

For further information concerning this matter, please call:

**Laura Thomas at (772) 299-7326.**

Sincerely,



Laura J. Thomas

Enclosed is a check for the following amount:

**\$160.00 Filing Fee, Certificate of Status & Certified Copy**

**ARTICLES OF ORGANIZATION  
OF  
ALLOW ME (TO DO IT FOR YOU), LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**Allow Me (to do it for you), LLC**

**ARTICLE II - Address:**

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

**1843 25<sup>th</sup> Av  
Vero Beach, FL 32960**

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

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

**Laura J. Thomas  
1843 25<sup>th</sup> Av  
Vero Beach, FL 32960**

*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: \_\_\_\_\_

*Laura J. Thomas*

(CONTINUED)

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

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

**MGR Laura J. Thomas**  
**1843 25<sup>th</sup> Av**  
**Vero Beach, FL 32960**

**ARTICLE V: Effective date, if other than the date of filing:**

**NOT APPLICABLE**

**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)