L07000022946

	equestor's Name)				
), (T	equestor's Name)				
	idress)				
(AC	iuless)				
()	ldress)				
(AC					
	hulchah (7) - IDh				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nan	ne)			
(Do	cument Number)				
Certified Copies	_ Certificates	of Status			
	•				
Special Instructions to	Filing Officer:	- "-			

Office Use Only



700089236447

02/28/07--01016--013 **130.00

3/1/07

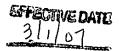
07 FEB 28 AMII: 31 Secretary of State

COVER LETTER

Registration Section

TO:

Division of Corporations						
SUBJECT: Mary Palmer & Associates, LLC						
(Name of Limited Liability Company)						
The enclosed Articles of Organization and fee(s) are sub	mitted for filing.					
Please return all correspondence concerning this matter t	o the following:					
Mary J. Palmer						
(Na	me of Person)					
Mary Palmer & Associates, L	LC					
(Fit	rm/Company)					
11410 Swift Water Cir.						
	(Address)					
Orlando, Florida 32817						
(City/St	ate and Zip Code)					
For further information concerning this matter, please cal	II:					
Mary Palmer	√407 382-1661 ·					
(Name of Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:						
	\$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					



ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Mary Palmer & Associates, 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	he principal office of the Limited Lia	bility Company is:		
Principal Office Address:	Mailing Address:			
11410 Swift Water Cir.	11410 Swift Water Cir.			
Orlando, Florida 32817	Orlando, Florida 32817			
11410 Swift Water C	Registered Agent. You must designate an individ the registered agent are:			
Orlando, Florida	FL 32817	<i>></i>		
City St	tate and Zin			

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, Thereby 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 Tam 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:

<u>Title:</u> "MGR" = Manag	er	Name and Address:			
"MGRM" = Man					
MGRM		Mary J. Palmer			
-	_	11410 Swift Water Cir.	7		
		Orlando, Florida 32817			
	_				
		-			
	_				
	males i				
(Use attachment i	f necessary)				
ARTICLE V: Effective of	late, if other than the da	ate of filing: March 1, 2007	OPTION	NAL)	
(If an effective date is list	ed, the date must be s	specific and cannot be more than five bu		,	
to or 90 days after the da	te of filing.)				
<u>REQUIRED</u> SIC	SNATURE:				
	m	Q_{1}	TAL SEC	07 F	
	Signature of a member (or an authorized representative of a member.	오줌	EB 28	773
		V	ASS	28	F
	of this document constitue that the facts stated her	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)	EF, F	AH 11: 3	ED
	Mary J. Palmer		LOR	<u>=</u>	
	Туре	d or printed name of signee	DATE		

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)