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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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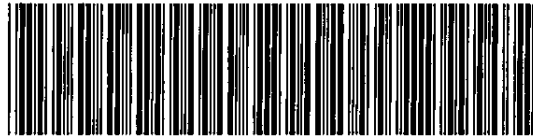
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
07 MAR 14 PM 1:15

W07-11110
J. BRYAN MAR - 6 2007

J. BRYAN MAR 14 2007

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Edwin P. Randolph, Attorney at Law, P.A., 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:

Edwin Randolph
(Name of Person)

Edwin P. Randolph, Attorney at Law, P.A., LLC
(Firm/Company)

11814 Cypress Hill Circle
(Address)

Tempe, FL 33626
(City/State and Zip Code)

For further information concerning this matter, please call:

Edwin Randolph at (956) 212-0133
(Name of Person) (Area Code & Daytime Telephone Number)

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Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 6, 2007

EDWIN RANDOLPH
EDWIN P. RANDOLPH, ATTORNEY AT LAW, P.A.
11814 CYPRESS HILL CIRCLE
TAMPA, FL 33626

SUBJECT: EDWIN P. RANDOLPH, ATTORNEY AT LAW, P.A., LLC
Ref. Number: W07000011110

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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
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We have received your document for EDWIN P. RANDOLPH, ATTORNEY AT LAW, P.A., LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "P.A.." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 707A00015815

PA has been taken out. Please
rush processing

Enclosed for you is a copy of the document that was returned to the Division of Corporations. The document was returned because it did not contain the correct information. Please review the document and make the necessary corrections. If you have any questions, please call (850) 245-6043.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Edwin P. Randolph, Attorney at Law, LLC ^{SRK}
(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 principal office of the Limited Liability Company is:

Principal Office Address:

11814 Cypress Hill Circle
Tempe, FL 33626

Mailing Address:

11814 Cypress Hill Circle
Tempe, FL 33626

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Pike Randolph
Name

5008 W Linbaugh Ave Ste. 18
Florida street address (P.O. Box **NOT** acceptable)

Tempe FL 33624-5013
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..

P. W. Randolph
Registered Agent's Signature (REQUIRED)

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(CONTINUED)

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

MGR

Name and Address:

Edwin Randolph
11814 Cypress Hill Circle
Tampa, FL 33626

(Use attachment if necessary)

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ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Edwin Randolph
Typed or printed name of signer

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)