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(Re	equestor's Name)			
(Address)				
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(Ci	ty/State/Zip/Phone	· #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

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DIVISION OF CORPORATIONS
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TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations

SUBJECT: PRINCE FINANCIAL CONSULTANTS, LIC

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

Please return all correspondence concerning this matter to the following:

Guy EDOUARD GARCIA
(Name of Person)

PRINCE FINANCIAL CONSULTANTS, LLC
(Firm/Company)

8759 CLUB ESTATES WAY

LAKE WORTH FLORIDA 33467-5244

For further information concerning this matter, please call:

GUY EDOUARD GARCÍA at 561 966-7307

(Name of Person) (Area Code & Daytime Telephone Number)

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)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 9, 2007

GUY EDOUARD GARCIA PRINCE FINANCIAL CONSULTANTS, LLC 8759 CLUB ESTATES WAY LAKE WORTH, FL 33467-5244

SUBJECT: PRINCE FINANCIAL CONULTANTS, LLC

Ref. Number: W07000011869

We have received your document for PRINCE FINANCIAL CONULTANTS, 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 document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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: 707A00016967

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
PRINCE FINANCIAL	CONSULTANTS, LLC	
ARTICLE II - Address: The mailing address and street address of the princ	sipal office of the Limited Liability Company is	:
Principal Office Address:	Mailing Address:	
8759 CLUB ESTATES WAY	SAME	
LAKE WORTH FL 33467-5244		
FL 33467-5244		
ARTICLE III - Registered Agent, Registered O The name and the Florida street address of the regi	ffice, & Registered Agent's Signature	350
The name and the Florida street address of the regi	istered agent are:	語
Guy E. GAR	CIA	E CO
Name	P	CORPO

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

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

LAKE WORTH FL 35467

City, State, and Zip

Registered Agent's Signature

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(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" = Manager	Name and Address:	
"MGRM" = Managing Member	· _	
MGR	GUY EDOUARD GARCI 8759 CLUB ESTATES W LAKE WORTH FL 334	i <u>A</u> <u>K</u> Y LF-52411
MGRM	EVELYN THIESFIELD GA 8759 CLUB ESTATES W LAKE WOATH FL 334	• •
	LAICE WOATH FL 334	67-5244
		<u> </u>
(Use attachment if necessary)		
NOTE: An additional article must b	e added if an effective date is requested.	SECRETO JIVISION O
REQUIRED SIGNATURE:		第二
Jun 4.	Davia	ARY OF ST AR CORPOR
Signature of a member	or an authorized representative of a member.	77.77

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)

(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.)

EDOUARD GARCIA
Typed or printed name of signee