

L07000046490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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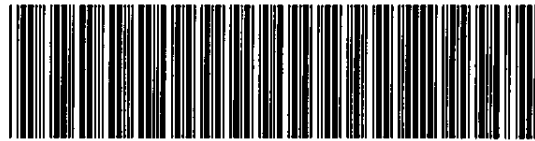
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## Transmittal Letter

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314-6327



**SUBJECT: Greater Brevard Indian River Accounting, LLC.**

Enclosed please find the original articles of Organization for the Limited Liability Company, Greater Brevard Indian River Accounting, LLC, and a check in the amount of \$ 160.00.

**FROM:** John M. S. Giovannoni EA CMA ATA  
*Name*  
3030 Juniper Drive  
Edgewater, Florida 32141-6208  
*Address, City, State & Zip Code*  
(850) 668-5330 (386) 428-9584  
*Telephone*  
(386) 428-7308  
*Fax Number*  
johnng@sbg-accountants.net donnap@sbg-accountants.net  
*e-mail*

Thank - you very much.

John M. S. Giovannoni EA CMA ATA

**Note:** Please provide and original and one copy of the articles.

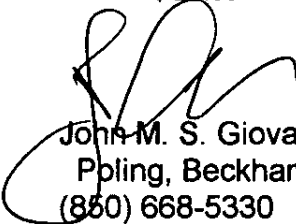
       \$ 125.00  
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Registered  
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Filing Fee &  
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  X   \$ 160.00  
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Certified Copy &  
Certificate of Status

Additional Copy of Articles Required When  
A Certified Copy is Requested

  
John M. S. Giovannoni EA CMA ATA  
Ppling, Beckham & Giovannoni, Inc.  
(850) 668-5330 (904) 428-9584



**Articles of Organization  
of  
Greater Brevard Indian River Accounting, LLC**

The undersigned members, for the purpose of forming a Limited Liability Company under Florida Law execute the following Articles of Organization.

**ARTICLE I**

The name of the Limited Liability Company shall be: **Greater Brevard Indian  
River Accounting, LLC**

**ARTICLE II**

The principal place of business address of the company shall be:

3030 Juniper Drive  
Edgewater, Florida 32141-6208

The mailing address of the company shall be:

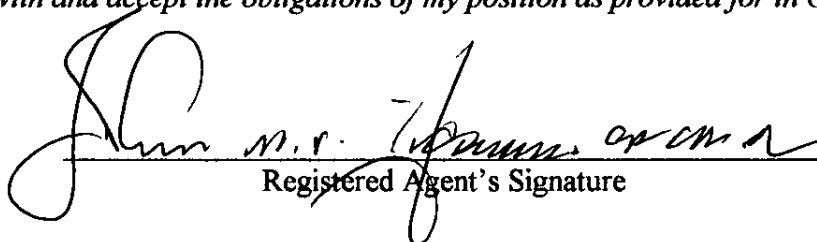
3030 Juniper Drive  
Edgewater, Florida 32141-6208

**ARTICLE III**

The name and address of the initial registered agent is:

John M. S. Giovannoni EA CMA ATA  
3030 Juniper Drive  
Edgewater, Florida 32141-6208

*Having been named as registered agent and to accept service of process for the above stated limited liability company as to the place designated in this certificate, I hereby accept 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 provided for in Chapter 608, F.S..*

  
Registered Agent's Signature

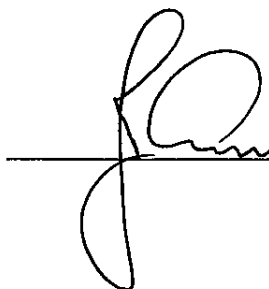
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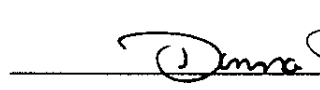
## ARTICLE IV

The Limited Liability Company is to be managed by one or more managers, and is therefore a manager-managed company.

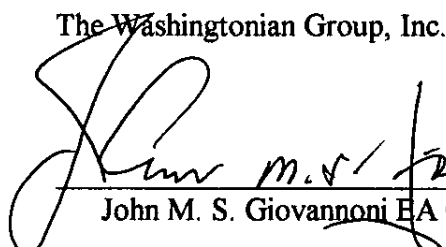
## ARTICLE V

Signatures of three members. 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 contained herein are true and correct to our best knowledge and belief.

  
\_\_\_\_\_  
John M. S. Giovannoni EA CMA ATA  
3030 Juniper Drive  
Edgewater, Florida 32141-6208

  
\_\_\_\_\_  
Donna Jean Poling EA ATP ATA  
3030 Juniper Drive  
Edgewater, Florida 32141-6208

The Washingtonian Group, Inc., by and through its officers:

  
\_\_\_\_\_  
John M. S. Giovannoni EA CMA ATA, Chair & Donna J. Poling EA ATA ATP, President  
3030 Juniper Drive  
Edgewater, Florida 32141-6208

Seal



The above has executed these Articles of Organization this

25<sup>th</sup> day of April, 2007