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TALLAHASSEE, FLORIDA

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A. LUNT

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EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Corporate Benefit Consultants Florida 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:

**John Daniel Fields**

(Name of Person)

**John Daniel Fields Attorney at Law P.A.**

(Firm/Company)

**12 E. Monument Ave.**

(Address)

**Kissimmee, FL 34741**

(City/State and Zip Code)

For further information concerning this matter, please call:

**John Fields**

(Name of Person)

at ( **407** ) **933-1347**

(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

**ARTICLES OF ORGANIZATION  
OF  
CORPORATE BENEFIT CONSULTANTS FLORIDA L.L.C.**

**ARTICLE I - NAME**

The name of the limited liability company is Corporate Benefit Consultants Florida L.L.C., ("company").

**ARTICLE II - ADDRESS**

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

Principal Office Address:

198 Bayou Bend Rd.  
Groveland, Florida 34736

Mailing Address:

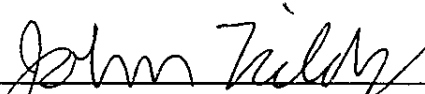
198 Bayou Bend Rd.  
Groveland, Florida 34736

**ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

John Daniel Fields  
12 E. Monument Ave.  
Kissimmee, Florida 34741

*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...*

  
\_\_\_\_\_  
John Daniel Fields

**ARTICLE IV - MANAGERS OR MANAGING MEMBERS**

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

Title:

"MGR" = Manager

"MGMR" = Managing Member

Name and Address:

MGMR

Joseph A Fields  
198 Bayou Bend Rd.  
Groveland, Florida 34736

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ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be December 31, 2007.

ARTICLE VI – The Nature of Business to be transacted or the purpose to be or carried out by the limited liability company:

The purpose of the Limited Liability Company is to engage in any lawful act or activity for which the limited liability companies may be formed under the Limited Liability Company Act of the State of Florida.

**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.)

John Daniel Fields  
\_\_\_\_\_  
Typed or printed name of signee