

108000019052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

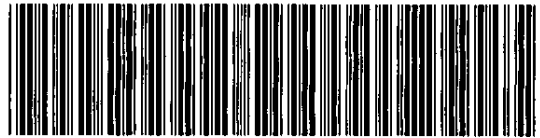
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

EFFECTIVE DATE 3-1-08



200118308312

02/21/08--01012--014 **155.00

FILED
08 FEB 21 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

FEB 21 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lawrence Financial Planning, LLC
(Name of Resulting Florida Limited Company)

The enclosed ~~Articles of Organization~~, Articles of Organization, and fees are submitted to ~~Secretary of State~~ "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

Julie W. Lawrence

(Contact Person)

Lawrence Financial Planning LLC

(Firm/Company)

4912 Pensbury Dr.

(Address)

Tampa, FL 33624

(City, State and Zip Code)

FILED
08 FEB 21 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Julie W. Lawrence at (813) 313-4575

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☒ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☐ \$185.00 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Lawrence Financial Planning, LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

4912 Pennsbury Dr.
Tampa, FL 33624

Mailing Address:

Same

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:


Julie W. Lawrence
Name
4912 Pennsbury Dr.
Florida street address (P.O. Box NOT acceptable)
Tampa FL 33624
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 FEB 21 PM 12:58

FILED

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..


Registered Agent's Signature (REQUIRED)

(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:

Julie W. Lawrence
4912 Pennsbury Dr.
Tampa, FL 33624

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 3-1-08
(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.)

Julie W. Lawrence
Typed or printed name of signee

FILED
08 FEB 21 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2008

SABRINA COLEMAN STAFF ACCOUNTANT
6148 LEE HWY., STE. 300
CHATTANOOGA, TN 37421

Re: Document Number A99000000169

The Certificate of Dissolution for ERMIC III LIMITED PARTNERSHIP, a Florida Limited Partnership, was filed on February 21, 2008.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration/Qualification Section.

Deborah Bruce
Regulatory Specialist II
Division of Corporations

Letter Number: 908A00011367.