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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Abacus Help Solutions	
(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:	
Carl Anthony Willoughby II	
(Name of Person)	
Abacus Help Solutions	
(Firm/Company)	
5372 Hawks Landing Drive #101	
(Address)	
Fort Myers, FL 33907	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Carl Anthony Willoughby II at 239 209-0777	-
Carl Anthony Willoughby II (Name of Person) (Area Code & Daytime Telephone Number)	
For further information concerning this matter, please call: Carl Anthony Willoughby II (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \\$\sum \\$\su	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:		
Abacus Help Solutions, LLC (Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Lia	ability Company	is:
Principal Office Address:	Mailing Address:		
5372 Hawks Landing Drive #101 Fort Myers, FL 33907	5372 Hawks Landing Drive #101 Fort Myers, FL 33907		ė
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You must designate an indivi	dual or another	1000
Carl Anthony Willou Name 5372 Hawks Landin	ng Drive #101 ddress (P.O. Box <u>NOT</u> acceptable) FL 33907	2008 MAR 31 PM 3: 02 SECRETARY OF STATE TALLAHASSEE, FLORIDA	

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)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:		Name and Address:	
"MGR" = Mar $"MGRM" = M$	nager Ianaging Member		
MGR		Carl Anthony Willoughby II	
		5372 Hawks Landing Drive #101	_
		Fort Myers, FL 33907	_
MGRM		Nicolette Losh	
		5372 Hawks Landing Drive #101	<u></u>
		Fort Myers, FL 33907	_
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(Use attachme	nt if necessary)		
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effective date is	listed, the date must be	specific and cannot be more than five busines	ss 👺ys pı
o days after the	date of filing.)	LAT	MAR
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REQUIRED S	SIGNATURE:	۳. ۲۳. ۲۳. ۲۳. ۲۳. ۲۳. ۲۳. ۲۳. ۲۳. ۲۳. ۲	
REQUIRED S	SIGNATURE:	RY OF	
REQUIRED S	SIGNATURE:	RY OF STA	
REQUIRED S		or an authorized representative of a member.	
REQUIRED S	Signature of a member	tion 608.408(3), Florida Statutes, the execution sutes an affirmation under the penalties of perjury	
REQUIRED	Signature of a member (In accordance with sect of this document constitution)	tion 608.408(3), Florida Statutes, the execution rutes an affirmation under the penalties of perjury erein are true.)	

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)