# L0000055528

*2
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Emity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
L. SELLERS
MAY <b>30</b> 2008

Office Use Only

**EXAMINER** 



000130104590

05/28/08--01008--001 \*\*125.00

SECRETARY OF STATE

## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

# . SUBJECT: Auburn Hills Education Service Limited Liability Company

(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:

Mervyn C. Timberla	ake ·	
	(Name of Person	n)
	•	
	(Firm/Company	)
114 Harbors Way	۲	
,	(Address)	
Boynton Beach, Flo	orida 33435	•
	(City/State and Zip C	Code)
For further information concerning this	s matter, please call:	
Mervyn C. Timberlake	<sub>at (</sub> 561	739-6162
(Name of Person)		Code & Daytime Telephone Number)
Enclosed is a check for the following	ng amount:	
\$125.00 Filing Fee \$130.00 F Certificate	e of Status Certified	
Mailing Ad	droce Strong	t/Courier Address

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

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# Auburn Hills Education Service Limited Liability Company

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

### **ARTICLE II - Address:**

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

Frincipal Office Address:	<u>Maning Address:</u>
Auburn Hills Education	
114 Harbors Way	
Boynton Beach, Florida 33435	
	Registered Office, & Registered Agent's Signature: its own Registered Agent. You must designate an individual or another n.)
The name and the Florida street addre	ess of the registered agent are:

Mervyn C. Timberlake

Name

114 Harbors Way

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

Boynton Beach, FI 33435

City, State, and Zip

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

2000 MAY 28 PH 1: 28
SECRETARY OF STATE

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

"MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MGR	Carolyn Timberlake
	3363 Torrey Pines Circle
•	Riner, Virginia 24149
•	Amorphisma 21110
•••	
	•
·	
	•
· · · · · · · · · · · · · · · · · · ·	
LE V: Effective date, if other if fective date is listed, the date	nan the date of filing: (OPTIONAL nust be specific and cannot be more than five business days
LE V: Effective date, if other the fective date is listed, the date days after the date of filing.)  REQUIRED SIGNATURE:	nan the date of filing: (OPTIONAL nust be specific and cannot be more than five business days
ffective date is listed, the date days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a (In accordance of this docume)	must be specific and cannot be more than five business days  Lead Color  member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury
ffective date is listed, the date days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a (In accordance of this docume that the fact.)	must be specific and cannot be more than five business days  Lealer Color  member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)
ffective date is listed, the date days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a (In accordance of this docume that the fact.)	must be specific and cannot be more than five business days  member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)  Timberlake
ffective date is listed, the date days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a line accordance of this docume that the fact.  Carolyn	must be specific and cannot be more than five business days  member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)  Timberlake
ffective date is listed, the date days after the date of filing.)  REQUIRED SIGNATURE:  Signature of signature of this docume that the fact.  Carolyn  Filing Fees:	must be specific and cannot be more than five business days  member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)  Timberlake
ffective date is listed, the date days after the date of filing.)  REQUIRED SIGNATURE:  Signature of signature of this docume that the fact.  Carolyn  Filing Fees:	must be specific and cannot be more than five business days  Lealer Color  member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)  Timberlake