

L08000094850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

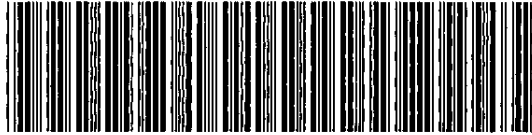
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700136460407

10/06/08--01024--026 \*\*125.00

Effective Date 10/01/08

2008 OCT -6 P 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

T. HAMPTON

OCT -7 2008

EXAMINER

62297-8077

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Mowrey, Shoemaker & Beardsley, PL**  
(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:

**Brandon D. Beardsley, Esq.**

(Name of Person)

**Mowrey, Shoemaker & Beardsley, PL**

(Firm/Company)

**3940 Lewis Speedway, Suite 2103**

(Address)

**St. Augustine, Florida 32084**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Brandon D. Beardsley, Esq.** at ( **904** ) **233-3758**

(Name of Person)

(Area Code & Daytime Telephone Number)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 7, 2008

BRANDON D BEARDSLWY, ESQ  
3940 LEWIS SPEEDWAY  
STE 2103  
ST AUGUSTINE, FL 32084

SUBJECT: MOWREY, SHOEMAKER & BEARDSLEY, PL  
Ref. Number: W08000046237

We have received your document for MOWREY, SHOEMAKER & BEARDSLEY, PL and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 108A00052883

Effective Date 10/01/08

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Mowrey, Shoemaker & Beardsley, PL

(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:

#### Principal Office Address:

3940 Lewis Speedway, Suite 2103  
St. Augustine, Florida 32084

#### Mailing Address:

3940 Lewis Speedway, Suite 2103  
St. Augustine, Florida 32084

### 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:

Brandon D. Beardsley, Esq.

Name

3940 Lewis Speedway, Suite 2103

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

St. Augustine, Florida 32084

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

**FILED**  
2008 OCT -6 P 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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

**Name and Address:**

MGRM

Brandon D. Beardsley, Esq.

3940 Lewis Speedway, Suite 2103

St. Augustine, Florida 32084

MGRM

Terry J. Shoemaker, Esq.

3940 Lewis Speedway, Suite 2103

St. Augustine, Florida 32084

MGRM

Daniel A. Mowrey, Esq.

3940 Lewis Speedway, Suite 2103


St. Augustine, Florida 32084

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: October 1, 2008. (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.)

**Brandon D. Beardsley, Esq.**

Typed or printed name of signee

**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)

2008 OCT -6 P 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**ARTICLE VI: PURPOSE**

**LAW PRACTICE**

**FILED**

2008 OCT -6 P 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA