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Effective Date 01/01/09

SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

JAN - 7 2009

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: CHARLES MAYNARD, P.L.				
(Name of Limited Liability Company)				
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	·	
Please return all correspondent	ondence concerning this mat	tter to the following:		
SHANNON MARIE CHARLES, ESQ.				
(Name of Person)				
<u></u>				
(Firm/Company)				
6071 CHAPLEDALE DRIVE				
(Address)				
ORLANDO, FL 32829				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
SHANNON MARIE CHARLES at 407 601-0612				
(Name	of Person)	(Area Code & Daytime Tel	ephone 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 Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301		

Effective Date 01 01 09

Articles of Organizationfor

CHARLES MAYNARD, P.L.

ARTICLE I - NAME

The name of the professional limited liability company is CHARLES MAYNARD, P.L., (the "Company"), and it shall be formed as a professional limited liability company under Chapters 608 and 621, Florida Statutes.

ARTICLE II- ADDRESS

The principal place of business for the professional limited liability company is:

6071 CHAPLEDALE DRIVE ORLANDO, FL US 32829

The mailing address of the professional limited liability company is:

6071 CHAPLEDALE DRIVE ORLANDO, FL US 32829

ARTICLE III- REGISTERED AGENT

The name and Florida address of the initial registered agent is:

SHANNON MARIE CHARLES, ESQ. 6071 CHAPLEDALE DRIVE ORLANDO, FL US 32829

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, Florida Statutes.

Registered Agent Signature:

ARTICLE IV- MANAGEMENT

The Company shall be managed by a managing member or managing members, in accordance with the Operating Agreement adopted by all members of the Company, and is, therefore, a

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DIVISION OF CORPORATION

managing member-managed company. The name and address of the managing member and members are:

Title: MGRM

SHANNON MARIE CHARLES, ESQ. 6071 CHAPLEDALE DRIVE ORLANDO, FL 32829

ARTICLE V- DURATION

The effective date of the Company shall be January 1, 2009, and the Company's existence shall be perpetual.

ARTICLE VI- PURPOSE

The purpose for which this professional limited liability company is organized is to PROVIDE ANY AND ALL LEGAL SERVICES.

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.)

Shannon Marie Charles, Esq.

Typed or printed name of signee