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(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone) #)
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SECRETARY OF STATE STATE SECRETARY OF CORPORATIONS

J. BRYAN

JAN 1 3 2009

EXAMINER

COVER LETTER

TO: Registration Division of Co					
SUBJECT: All Co	unty Legal Group,	LLC			
	(Name of Limit	ed Liability Comp	any)		
The enclosed Articles	of Organization and fee(s) are	submitted for filin	g.		
Please return all corres	pondence concerning this matt	er to the followin	3:		- 9
Janice A.	McIntyre, Esq.				09 JA
		(Name of Person)			09 JAN 12 PH 3: 26
		T. (G			`Z
		(Firm/Company)			مع
6118 SW	32nd ST	(Address)			<u>`</u>
	FL 33023 (Cit	y/State and Zip Cod	e)		
Janice A. McIr	-	at (954	、445-184	.9	
	e of Person)		le & Daytime Tel	ephone Number)	
_	or the following amount: \$130.00 Filing Fee & Certificate of Status	\$155.00 Filit Certified Co (additional cop	ру	\$160.00 Filing Fee Certificate of Statu Certified Copy (additional copy is enc	s &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton I 2661 Ex	ourier Address ion Section of Corporation Building ecutive Center (see, FL 32301	s	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is:

All County Legal Group, LLC	
(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 Lighility.	ſ

6118 SW 32nd St	6118 SW 32nd St
Miramar, FL 33023	Miramar, FL 33023

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:

lanice A. McIntyre
Name
S118 SW 32nd St
Florida street address (P.O. Box NOT acceptable)
Miramar, 33023 _{FL}
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)

<u>Title:</u> "MGR" = Manager	Manager or Managing Member is as follows: Name and Address: Der Janice A. Mcntyre, Esq. W. Cawa, Fr. 33023
"MGRM" = Managing Memb	per
MGRM	Janice A. Mcntyre, Esq.
	6118 SW 32 nd St
	Miramas, P2 33023
(Use attachment if necessary)	
•	
LE V: Effective date, if other fective date is listed, the date	than the date of filing: (OPTIONA must be specific and cannot be more than five business day
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LE V: Effective date, if other fective date is listed, the date days after the date of filing.) REQUIRED SIGNATURE: Signature of (the accordance of this document)	than the date of filing: (OPTIONA must be specific and cannot be more than five business day

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)