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Special Instructions to Filing Officer:

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**EXAMINER** 

Office Use Only



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# **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations	
SUBJECT: Bookkeeping & Administra	tive Services of PBC, LLC
	Liability Company)
The enclosed Articles of Organization and fee(s) are sub	omitted for filing.
Please return all correspondence concerning this matter	to the following:
Sonja McGlinnen	
(Na	ame of Person)
Bookkeeping & Administrative	Services of PBC, LLC
(Fi	rm/Company)
12421 Colony Preserve Drive	
	(Address)
Boynton Beach, Florida 33436	3
(City/S	tate and Zip Code)
For further information concerning this matter, please ca	di.
1 of turner information concerning this matter, please ca	ш.
Sonja McGlinnen	436-7330
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A D	rici	I IZ	T '	Nam	
ΑК	114	J.H.	I -	Nam	$\boldsymbol{e}$

The name of the Limited Liability Company is:

## Bookkeeping & Administrative Services of PBC, 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 Liability Company is:

Principal Office Address:	Mailing Address:	
12421 Colony Preserve Drive	12421 Colony Preserve Drive	
Boynton Beach, Florida 33436	Boynton Beach, Florida 33436	

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

(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:

Sonja McGilnnen	
Name	;
12421 Colony Prese	erve Drive
Florida street ad	dress (P.O. Box NOT acceptable)
Boynton Beach	<sub>FL</sub> 33436
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

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SECRETARY OF STATE
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# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

113 4 C D H 3 4		Name and Address:
"MGR" = Mana "MGRM" = Mar		
MGRM		Sonja McGlinnen
TOTAL		12421 Colony Preserve Drive
		Boynton Beach, Florida 33436
MGRM		Jeffery McGlinnen
		12421 Colony Preserve Drive
		Boynton Beach, Florida 33436
<del></del> -		
(Use attachment	if necessary)	
	• /	
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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)

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