## 409000062680

(Requestor's Name)			
. (Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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SECRETARY OF STATE DIVISION OF CORPORATIONS

09 JUN 26 AM II: 15

T. HAMPTON

JUN 2 9 2009

**EXAMINER** 

## **COVER LETTER**

10:	Registration Division of C				
SUBJECT: A			oice for Change	•	
		Name of Limit	ed Liability Company		
The en	closed Articles	of Organization and fee(s) are	submitted for filing.		
Please	return all corres	pondence concerning this mat	ter to the following:		
		Donna App	el or Judith A. Reyr	nolds	
			Name of Person		
		AV	oice for Change		
			Firm/Company		
		22	South H Street		
	Address				
	Lake Worth, FL 33460				
		Ci	ty/State and Zip Code		
_		E-mail address: (to be used	for future annual report noti	fication)	
For fur	ther informatior	concerning this matter, pleas	e call:		
Do		or Judith A. Reynolds	_at (866)	464-4931	
	Name	e of Person	Area Code & Day	time Telephone Number	
Enclos	sed is a check t	for the following amount:			
<b>3</b> \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee Certified Copy (additional copy is end	Certificate of Status &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Registration Sec Division of Con Clifton Buildin 2661 Executive Tallahassee, FI	etion  porations g  Center Circle	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:				
A Voice for Change, 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 pri	incipal office of the Limited Liability Company is			
Principal Office Address:	Mailing Address:			
22 South H Street Lake Worth, FL 33460	22 South H Street Lake Worth, FL 33460			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)				
The name and the Florida street address of the re	egistered agent are:			
Donna A Name	ppel			
22 South H	Stroot			
Florida street address (P.O.				
Lake Worth City, State, an	_FL nd Zip			
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of airformance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S			
Registered Agent's Signar	SECRETARY (REQUIRED)			
(CONTINU	SP S			

## Page 1 of 2

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

Title:	Name and Address:					
"MGR" = Manage						
"MGRM" = Mana	iging Member					
Manager	Donna Appel					
	22 South H Street					
	Lake Worth, FL 33460					
Manager	Judith A. Revnolds					
	235 Dartmouth Drive					
	Lake Worth, FL 33460					
(Use attachment i	Fnooggan					
(Ose attachment i	. necessary)					
ARTICLE V: Effective d	ate, if other than the date of filing: (OPTIONAL)					
(If an effective date is list	ed, the date must be specific and cannot be more than five business days prior					
to or 90 days after the da	e of filing.)					
REQUIRED SIG	NATURE:					
	duch a Keineld					
	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.)  Judith A. Reynolds					
=	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)