

LO9000074618

(Requestor's Name)

(Address)

(Address)

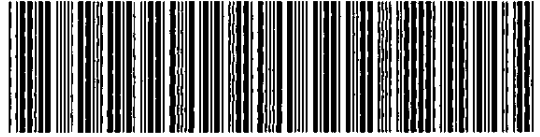
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



300159156453

08/03/09--01020--016 **125.00

Special Instructions to Filing Officer:

Andrew Mitchell DATE

AUTHORIZATION BY PHONE TO

CORRECT name + purpose

DATE 8/4/09

FOR EXAM Cliff

Office Use Only

EFFECTIVE DATE 8/1/09

FILED
09 AUG -3 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
AUG 04 2009
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Andrew Mitchell, PLLC
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:

Andrew Mitchell, PLLC
Name of Person

Andrew Mitchell
Firm/Company

1018 Wyomi Dr.
Address

Fort Myers FL 33919
City/State and Zip Code

andrewmitchellpa@live.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew Mitchell at (**239**) **415-1000**
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

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Andrew Mitchell PLLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

This limited liability company will provide licensed real estate agency services.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1018 Wyomi Dr.
Fort Myers FL 33919

1018 Wyomi Dr.
Fort Myers FL 33919

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:

Andrew Mitchell

Name

1018 Wyomi Dr.

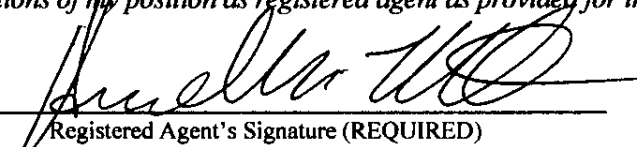
Florida street address (P.O. Box **NOT** acceptable)

Fort Myers, FL 33919 FL

City, State, and Zip

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TALLAHASSEE, FLORIDA

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)

EFFECTIVE DATE 8/1/09

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:

MGR

Andrew Mitchell

1018 Wyomi Dr.

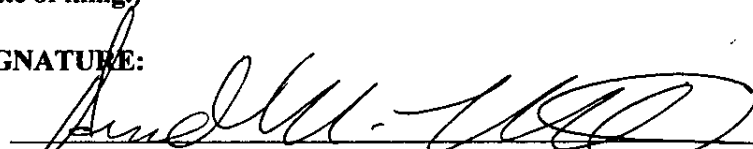
Fort Myers, FL 33919

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Aug. 1st 2009 (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.)

Andrew Mitchell

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)

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