L09000090272

(Re	equestor's Name)	
(Ac	dress)	
,	,	
•		
	ddress)	
(AC	idless)	
· (Ci	ty/State/Zip/Phone #)
	_	
.PICK-UP	WAIT	MAIL
/D:	E W N	
(Bt	usiness Entity Name)	,
	*	
(Do	ocument Number)	* *
Certified Copies	Certificates of	Statue
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer	
opeoiai instructions to	i iiiig Officer.	•
	•	

Office Use Only



600160709266

09 SEP | 7 PH |2: 27
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

J. BRYAN

SEP 18 2009

EXAMINER

COVER LETTER

то:	Registration Division of C	Section Corporations		
SUBJE	CT:	CONCIERGE LE	egal LLC	
50201		Name of Limited I	Liability Company	
Th	درادنسه لاددواد	af Our animation and frac(a) and such		
i ne en	ciosed Articles	of Organization and fee(s) are sub-	mitted for filing.	<i>*</i>
Please	return all corre	spondence concerning this matter t	o the following:	SEC.
		Valerie Lea	atherwood	# T
		Na	me of Person	SS A
		Conciera	e Legal LLC	TARY OF STATE
		Fir	m/Company	9E 2
		8512 W	oodbrian Dr Address	5m
			Address	· · · · · ·
		Saraso	ta, FL 34238	
		City/St	aic and Zip Code	
_		Vleatherwood (E-mail address: (to be used for fi	2 gmail.com	
		E-mail address: (to be used for fi	uture annual report notification)	
For fur	ther informatio	n concerning this matter, please cal	11:	
Va	lerie Nam	Leatherwood at at at a conferment of Person	Area Code & Daytime Teleph	262 none Number
Enclos	sed is a check	for the following amount:		
1 \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	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 Tallabasses, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLES OF ORGANIZATION FOR FLORIDA LAWITED LIABILITY CONGANI
ARTICLE 1 - Name:
The name of the Limited Liability Company is:
Coursiance Leas I II C
CONCIERGE Legal LLC (Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")
(Masteria with the words Emitted Embitty Company, E.E.C., of Ecc.)
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
8592 Woodbriar Dr. 8592 Woodbriar Dr. Saeasota, FL 34238 Sarasota, FL 34238
Salasota, FL 34238 Salasota, FL 34238
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:
Valerie Leatherwood
Valerie Leatherwood Name
8512 Woodbrian Dr.
Florida street address (P.O. Box <u>NOT</u> acceptable)
Sakasota FL 34238 City, State, and Zip
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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MUR	Valerie Leatherwood 700 8572 Woodbrian Dr. 95 Sarasota, FL 34238
(Use attachment if necessary)	
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)	date of filing: (OPTIONAl e specific and cannot be more than five business days
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	date of filing: (OPTIONAle specific and cannot be more than five business days Lewood or or an authorized representative of a member.
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with see	e specific and cannot be more than five business days Lewood or or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury
ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document constitute the facts stated here	e specific and cannot be more than five business days Lewood or or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury