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Office Use Only

S. HAWKES

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EXAMINER



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EXAMINER

W09-4196



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 18, 2009

EDWARD L BOARDMAN PO BOX 600216 JACKSONVILLE, FL 32260

SUBJECT: UNITY ENTERPRISE GROUP

Ref. Number: W09000041981

We have received your document for UNITY ENTERPRISE GROUP and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Letter Number: 009A00030768

Suzanne Hawkes Regulatory Specialist II

### TRANSMITTAL LETTER

TO:	Registration Se Division of Cor				
SUBJE	сст: <u> </u>	Name of Limited	<i>Group</i> d Liability Company)		
The end	closed Articles of	Organization and fee(s) are so	ubmitted for filing.		
Please 1	return all correspo	ondence concerning this matte	r to the following:		
	Edw	ard L. Boord	Lman Name of Person)		
· · · · · · · · · · · · · · · · · · ·	Unity E	ENterprise G	Firm/Company)		
	POB	0× 600216	(Address)		
Jacksonville, F1. 32260 (City/State and Zip Code)					
For furt	her information o	concerning this matter, please	call:		
Edi	nardT. (Name	Soardman of Person)	at ( <u>904</u> ) <u>287</u> (Area Code & Daytime Te	. 9895 elephone Number)	
Enclos	ed is a check fo	r 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	

#### STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: Unity Enterprise Group, 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: 2711 Race Track Rd ST. Johns, Fl 32259 PO BOX 600216 Jackson 4:11e, F1 32260

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Edward L Boardman

2335 Hawkcrest Dr E

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

ST. Dhws, FL, 32259 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

(CONTINUED)

ambar(e):

#### 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Edward L. Boardman 2335 Hawkerest Dr.E
	ST. Johns, FI 32259
MGRM	Amanda Gross 3875 Valencia Rd Jackson Ville, Fl 32205
MGZM	Denise Caldwell 9360 Cravin Rd #1005
MG-RM	Dianne Costello 4315 Lexington Ave

(Use attachment if necessary) See a Hacked

NOTE: An additional article must be added if an effective date is requested.

#### **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.)

Ward 1 Boardman

#### 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)

Liz Carroll MGRM 1536 Greenridge Circle West St. Johns, FL 32259

Joan Madison 1536 Greenridge Circle West St. Johns, FL 32259 404/277-3146

Dianne Costello 4315 Lexington Ave aiready (TSted) Jacksonville Fl. 32210

Benjamin Dapaah 3591 Kernan Blvd #133 ~ へらんか Jacksonville, Fl 32224

Shelia L Lynn 8700 Southside Blvd # 1716 MGRM Jacksonville, Fl 32256

George Schliefer 9360 Craven Rd # 1005 MGRM Jacksonville, Fl 32257 FILED MIII.03