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| GotHried Keller (Requestor's Name) | | |
|---|--|--|
| MÉG Consultants LLC | | |
| 2355 Azalea Dr. (Address) | | |
| Palm Harbar F7 34683-582 (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE
TAIL ANASSES FLOWING

J. BRYAN

FEB -5 2009

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| M & G Cons | ultants LLC | |
|---|---|---------------------------|
| | iability Company," "L.L.C.," or "LLC.") | |
| ARTICLE II - Address: The mailing address and street address of the | e principal office of the Limited Liability Comp | any is: |
| Principal Office Address: | Mailing Address: | |
| 2355 Azalea Dr | 2355 Azalea Dr | |
| Palm Harbor, FL 34683-5887 | Palm Harbor, FL 34683-5887 | |
| business entity with an active Florida registration.) The name and the Florida street address of the Gottfrie Na | ed Keller ARE ARY Azalea Dr | 10 FEB -4 PM |
| Florida street address (P.O. Box <u>NOT</u> acceptable) | | ₩ C |
| Palm Harbor, FL 346 City, Stat | ec, and Zip | 37 |
| Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete | to accept service of process for the above stated lin this certificate, I hereby accept the appointmenticity. I further agree to comply with the provision experformance of my duties, and I am familiar with egistered agent as provided for in Chapter 608, F | t as s of all h and |

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Margaretta Short 2367 Azalea Dr Palm Harbor, FL 34683-5887 MGR Gottfried Keller 2355 Azalea Dr Palm Harbor, FL 34683-5887 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (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.)

Gottfried Keller

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)