

L10000060239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

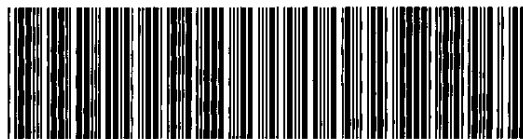
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
10 JUN 21 PM 19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JUN 22 2010

EXAMINER

EFFECTIVE DATE 6/24/10

Charles T. Morris
605 Orange Blossom Lane
Deland, Florida 32724

Telephone: 863-697-9041

June 19, 2010

Department of State
Registration Section
Post Office Box 6327
Tallahassee, FL 32314

Re: Morris Business Solutions, LLC

Gentlemen & Mesdames:

Enclosed is the original of the Articles of Organization and a check for \$125.00 which represents:

Filing Fee	\$100.00
Designation of Registered Agent:	<u>25.00</u>
	\$125.00

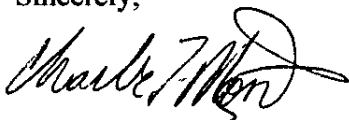
Please return all correspondence concerning this matter to the above address. Please note that future annual report notification can be sent to the following e-mail address:

ctm4848@morrisworld.net

For further information regarding this matter, please call me at 863-697-9041

Thank you.

Sincerely,



Charles T. Morris

Enclosures

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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE 1 – Name

The name of the Limited Liability Company is:

MORRIS BUSINESS SOLUTIONS, LLC

ARTICLE II – Address

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

Principal Office Address:

**605 Orange Blossom Lane
Deland, FL 32724**

Mailing Address:

**605 Orange Blossom Lane
Deland, FL 32724**

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ARTICLE III – Registered Agent, Registered Office, and Registered Agent's Signature

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

**Charles T. Morris
132 North Boston Avenue
Deland, FL 32724**

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

EFFECTIVE DATE 6/24/10

ARTICLE IV – Manager(s) or Managing Member(s)

The name address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGRM"	CHARLES T. MORRIS
	132 North Boston Avenue
	Deland, FL 32724

ARTICLE IV - Effective Date

The effective date for this Limited Liability Company is **June 24, 2010.**

ARTICLE V - Signature



CHARLES T. MORRIS

(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.)

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