

(Req.	uestor's Name)				
(Add)	ress)				
(Add	ress)				
(City/	/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Busi	iness Entity Nan	ne)			
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					

200183484312

07/28/10--01011--004 **130.00

10 JUL 28 PH 12: 57

Office Use Only

G. MCLEOD

JUL 29 2010

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations							
SUBJECT:	Patrick	d's Bookkeeping, LLC					
GODGECT.	Name of Limited Liability Company						
The enclosed Ar	rticles of	f Organization and fee(s) are	submitted for	r filinį	g.		
Please return all	corresp	ondence concerning this matt	er to the follo	owing	g :		
		Christina A Patri					
			Name of Pers	on			
<u> </u>		Patrick's Bookke					
			Firm/Compa	ny			
		27011 65th Ave	East				
			Address				
		Myakka City, Fl.	34251				
-		City	y/State and Zij	p Code	•		
		capatric@mail.us			1/4	,	
		E-mail address: (to be used f	or future annu	al repo	ort notificat	ion)	
For further infor	mation	concerning this matter, please	call:				
Christina Pate	rick		at (941		737-25	545	
	Name	of Person		a Code	& Daytim	e Telep	hone Number
Enclosed is a c	heck fo	or the following amount:					
⊒\$125.00 Filing	g Fee	☑\$130.00 Filing Fee & Certificate of Status	Certifie (addition	d Co	_		\$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	Reg Div Clii 266	gistrati vision fton B 51 Exe	ourier Addion Section of Corpor Building ecutive Cesee, FL 32:	ations	

ARTICLES OF ORGANIZATION OF PATRICK'S BOOKKEEPING, LLC A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 NAME

The name of the Limited Liability Company ("Company") is Patrick's Bookkeeping, LLC.

ARTICLE 11 ADDRESS

The mailing and street address of Patrick's Bookkeeping, LLC is 27011 65th Ave East, Myakka City, Florida 34251.

ARTICLE 111 REGISTERED AGENT

Registered Agent, Registered Office, & Registered Agent's Signature:

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

Christina A Patrick
27011 65th Ave East
Myakka City, Florida 34251

10 JUL 28 PM 12: 57
SECRETARY OF STARE
TALLAHASSEE, FLOWIDA

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, Florida Statutes.

Christina A Patrick, Registered Agent

ARTICLE IV MEMBERS

The Limited Liability Company is to be managed by one or more members and is therefore a member-managed company.

Christina Patrick - Managing Member 27011 65th Ave East, Myakka City, Florida 34251

Robert B Patrick – Managing Member 27011 65th Ave East, Myakka City, Florida 34251

IN WITNESS WHEREOF, I HAVE EXECUTED THESE ARTICLES OF ORGANIZATION ON THIS ____ DAY JUNE, 2010.

By: Christina Patrick, Managing Member

STATE OF FLORIDA COUNTY OF MANATEE

The foregoing instrument was acknowled	edged before me this 924	day of June, 2010,
by Christina Patrick, Managing Membe	who is personally know to	me or who has
produced	as identification.	

Notary Stamp

Notary Signature
My Commission Expires:

DIANN WOODFIELD

DIANN WOODFIE

DIANN WOODFIELD Commission DD 653664 Expires June 17, 2011 Bonded Thru Troy Fain Insurance 200 385-7019