L100001186666

(Requ	uestor's Name)	
. (Addr	ess)	
(Addr	ess)	
(142	,	
(City)	Otato/Zin/Dhan	- 40
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
	oon, nod so	or oracido
Special Instructions to Fil	ing Officer:	
		ŀ
		ļ
		

Office Use Only



200187485722

11/12/10--01008--019 **125.00



C. LEWIS NOV 16 2010 EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2010

LARRY S. WEAVER WEAVER CONSULTING, LLC 16115 E. COURSE DRIVE TAMPA, FL 33624-1123

SUBJECT: WEAVER CONSULTING, LLC

Ref. Number: W10000052687

We have received your document for WEAVER CONSULTING, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any further questions concerning your document, please call (850) 245-6047.

Letter Number: 110A00026465

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: Weaver Consulting, LL	.C
	ed Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matter	ter to the following:
Larry S. Weaver	Name of Person
Weaver Consulting, LLC	Name of Felson
	Firm/Company
16115 East Course Drive	
	Address
Tampa, FL 33624-1123	y/State and Zip Code
ls.weaver@gte.net	or future annual report notification)
For further information concerning this matter, please	
Larry S Weaver	at (813) 962-3097
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\\$\\$130.00 Filing Fee &\ Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Com	pany is:	
Weaver consulting, LLC		
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	of the principal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
16115 East Course Drive	16115 East Course Drive	
Tampa, FL 33624-1123	Tampa, FL 33624-1123	
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered Agent's Signan Registered Agent. You must designate an individual of the registered agent are:	
Larry S Weaver	NI	る
	Name	ا الله المحاجم
16115 East (Course Drive	三 三
Florida	street address (P.O. Box NOT acceptable)	9. 9.
Tampa	FI 33624-1123	ਰੰਜਾਂ 🀱

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(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 10 NOV 15 AM 9: 88

MGRM	Larry S Weaver
	16115 East Course Drive
	Tampa, FL 33624-1123
MGR	Sharon C Weaver
	16115 East Course Drive
	Tampa, FL 33624-1123
(Use attachment if necessary)	

REQUIRED SIGNATURE:

Signature of a member of 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Larry S Weaver

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)