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Effective Date 01/01/11

DIVISION OF CORPORATION

T. HAMPTON DEC - 8 2010

EXAMINER

COVER LETTER

TO	Division of Corporations
SUI	BUECT: Baker & Messer
	Name of Limited Liability Company
The	enclosed Articles of Organization and fee(s) are submitted for filing.
Plea	ase return all correspondence concerning this matter to the following:
	Stephen Messer Name of Person
	Name of Person
	Firm/Company
	2055 Thomasuille Rd #E209
	Address
	Tallahassee, FL 32308 City/State and Zip Code
	Smesser@ coppins Monroe. Com F-mail address: (to be used for future annual report notification)
For	further information concerning this matter, please call:
	Stephen Messer at (863) 528-1056 Name of Person Area Code & Daytime Telephone Number
	Name of Person Area Code & Daytime Telephone Number
	closed is a check for the following amount:
] \$125	5.00 Filing Fee \$\ \text{\$130.00 Filing Fee & Certificate of Status} \ \ \text{\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \ \ \text{\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \ \ \text{\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \ \ \text{\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \ \ \ \text{\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \ \ \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \ \ \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Florida Department of State Division of Corporations P.O.Box 6327 Tallahassee, FL 32314

Re: Cover Letter for Articles of Organization

To Whom It May Concern:

This letter is to serve as the required cover letter for the Articles of Organization for **Baker & Messer**, LLC. I am to serve as the contact for any inquires regarding the organization and continue operation of this LLC, you may contact me by phone (863) 528-1056, email smesser@coppinsmonroe.com, or by mail at:

Stephen Messer 2055 Thomasville Road #E209 Tallahassee, FL 32308

Enclosed are the Articles of Organization and a check for \$130.00 to cover the filing fee and certificate of status.

Stophan 1 Manuary

Effective Date 01 01 11

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Baker & Messer, LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "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:
2055 Thomasuille Rd. #E209 Tallahassee, FL 32308	(Same)

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual or another business entity with an active Florida registration.)

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

Stephen Messer

Name

2055 Thomasville Rd. #E209

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

Tallahassee FL 32308

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 (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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Stephen Messer 2055 Thomasville Rd #E209 Tallahasspe, FL 32308
MGRM	Scott Baker 28 Chetwynd Rd Somerville, MA 02144
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than (If an effective date is listed, the date mus to or 90 days after the date of filing.)	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE. Signature of a per	mber or an authorized representative of a member.
constitutes an affirmation ur I am aware that any false in	608.408(3). Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
	Typed or printed name of signee
Filing Fees:	On or
\$125.00 Filing Fee for Articles of O of Registered Agent	(SS) (P)

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)