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SECRETARY OF STATE
AHASSEE, FLORID

B. BOSTICK APR **2 0 2011**

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: MOORE CONSULTING & ASSURANCE

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

OSCAF	R A MOORE		
		Name of Person	
MOOR	E CONSULTING &	ASSURANCE	
		Firm/Company	
303 WH	HEELER WOODS C	Т	ΓAS _
		Address	A A
BRANDO	N, FL 33510		APR TO
	City	/State and Zip Code	m.
mooreton	y711@gmail.com		11
	E-mail address: (to be used for	or future annual report notification)	ID: 34 FIATE PORID
For further informati	on concerning this matter, please	call:	34 TE ADA
OSCAR A MO		at (813) 662-9778	
Na	me of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center (s

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MOORE CONSULTING & ASSURANCE 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	<u>.</u>
303 WHEELER WOODS C	303 WHEELER V	VOODS CT
BRANDON, FL 33510	BRANDON, FL 3	3510
(The Limited Liability Company can business entity with an active Florid	A Agent, Registered Office, & Register not serve as its own Registered Agent. You must des da registration.) Treet address of the registered agent are:	ignate an individual oranother APR
Shari I	Moore	3.5.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.
	Name	
303 WHEELER WOODS CT		FLORID: 3
	Florida street address (P.O. Box NOT ac	ORIO ORIO ORIO ORIO ORIO ORIO ORIO ORIO
Brando	on _{FL} 33510	
	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..

tegistered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u>	Name and Address:	
"MGR" = Manager "MGRM" = Managing Mem	ber	
Manager	OSCAR A MOORE	
	303 WHEELER WOODS CT	
	BRANDON, FL 33510	
		
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		S P
		AM 10: 34
		34
		A
(Use attachment if necessary	γ)	
·		(OPTIONAL)
I ICLE V: Effective date, if other in effective date is listed, the dat	r than the date of filing: te must be specific and cannot be more than five	business days prior
or 90 days after the date of filing		Description and a process
•	,	
REQUIRED SIGNATURI	Re	
<u> </u>		
· Do	oMoole	
Signature o	of a member or an authorized representative of a member	er.

(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.)

OSCAR A MOORE

Typed or printed name of signee

Filing Fees:

N. T.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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



April 5, 2011

OSCAR A. MOORE 303 WHEELER WOODS COURT BRANDON, FL 33510

SUBJECT: MOORE CONSULTING & ASSURANCE LLC

Ref. Number: W11000019221

We have received your document for MOORE CONSULTING & ASSURANCE LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 411A00008278