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(Requestor's Name)	
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(City/State/Zip/Phone #)	06/03/1101038012 **160.00
(Business Entity Name)	
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TO: **Registration Section Division of Corporations**

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SUBJECT: Ahearn Certified Court Reporting, L.L.C.

Name of Limited Liability Company

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

<u>\</u>____

Please return all correspondence concerning this matter to the following:

Jennife	r Ahearn		
		Name of Person	
Ahearn	Certified Court Re		•
		Firm/Company	
1695 P	inellas Bayway S., A	\-8	
		Address	
St. Peter	sburg, Florida 33715		
· · · · · ·	City	V/State and Zip Code	
ahearncc	r@yahoo.com		
	E-mail address: (to be used for	or future annual report notification)	
For further informati	on concerning this matter, please	call:	
Jennifer Ahear	'n	at (609 828-2668	
Na	me of Person	Area Code & Dastime Tele	phone Number
Enclosed is a check	c for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailing Address</u> 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 O	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Ahearn Certified Court Reporting, L.L.C.

(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:

1695 Pinellas Bayway S., A-8 St. Petersburg, Florida 33715

Mailing Address:

1695 Pinetkas Bayway S., A-8 St. Petersburg, Florida 33715

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:

Michael S. Ahearn

Name

1695 Pinellas Bayway S., A-8

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

St. Petersburg FL 33715

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 her**eby 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..

PH 4:

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:	
_	

Name and Address:

"MGR" = Manager "MGRM" = Managing Member

MGR

Jennifer Aheam 1695 Pinellas Bayway S., A-8 St. Petersburg, Florida 33715

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: June 1, 2011 . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

<u>REQUIRED</u> SIGNATURE:

Signature of a member or/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.)

Jennifer Ahearn

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 50.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)