11000010545

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
L. SELLERS		
JUN -7 2011 EVAMINER		

Office Use Only

000208204940

06/06/11--01051--010 **125.00

SEGRETARY OF STATE

Fire Prevention Specialists of Central Florida, LLC. Carrie Walker 6511 Green Swamp Road Clermont, Fl. 34714

June 1, 2011

To Whom it may concern:

I am writing you in regards to filing articles of organization for Fire Prevention Specialists of Central Florida, LLC. Please see the following document and check for the filing fee.

My Mailing Address Is: Carrie Walker 6511 Green Swamp Road Clermont, Fl. 34714 (352) 460-2112

The Business Address Is: 4210 Dorwood Drive Orlando, Fl. 32818-8500

I thank you for your time and consideration.

Sincerely,

Carrie Walker

COVER LETTER

TO:

Registration Section

Division of Corporations SUBJECT: Fire Prevention Specialists of Central Florida, LLC 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: Carrie Walker Name of Person Fire Prevention Specialists of Central Florida, LLC Firm/Company 6511 Green Swamp Road Address Clermont, FL. 34714 City/State and Zip Code firepreventionspecialists@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carrie Walker Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$160.00 Filing Fee, \$155.00 Filing Fee & **✓**\$125.00 Filing Fee __\$130.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street/Courier Address **Mailing Address** Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Fire Prevention Specialists of Central Florida, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

1 The par Office 1 to the coor	TARREST V TOTAL AND A
Fire Prevention Specialists of Central Florida, LLC	Fire Prevention Specialists of Central Florida, LLC
4210 Dorwood Drive	6511 Green Swamp Road
Orlando, FL. 32818-8500	Clermont, FL. 34714

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:

Carrie Walke	er
	Name
6511 Gree	en Swamp Road
Flo	orida street address (P.O. Box NOT acceptable)
Clermont,	_{FL} 34714
	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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
Manager	Carrie Walker
	6511 Green Swamp Road Clermont, FL. 34714
	
(Use attachment if necessary)	
	han the date of filing: June 1, 2011 (OPTIONAL) must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	Manual Ma
constitutes an affirmati	ction 608.408(3), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true. Is information submitted in a document to the Department of State

constitutes a third degree felony as provided for in s.817.155, F.S.)

Carrie Walker

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)