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TALLAHASSEE, FLORIDA

2011 JUN - 8 AM 10:06

**C. LEWIS**

JUN 9 2011

**EXAMINER**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AWARENESS COUNSELING AGENCY, 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:

IDA O. FITZ  
Name of Person

Firm/Company

8611 Gold Cay  
Address

West Palm Beach, FL 33411  
City/State and Zip Code

idaofitz@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ida O. Fitz at (561) 307-1766  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee<br>Certificate Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional <i>copy</i> is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR**  
**AWARENESS COUNSELING AGENCY, LLC**  
**A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, desiring to form a limited liability company under the Corporation Law of Florida, Chapter 608 of the Florida Statutes, hereby certifies:

**ARTICLE I – NAME**

The name of the limited liability company shall be AWARENESS COUNSELING AGENCY, LLC.

**ARTICLE II – PRINCIPAL OFFICE**

The principal office of the limited liability company is located at 8611 Gold Cay, West Palm Beach, Palm Beach County, Florida, and the mailing address is the same.

**ARTICLE III – MANAGEMENT**

The limited liability company is a member-managed company to be managed by one or more members. The following person(s) shall serve the limited liability company as a manager(s), until otherwise provided for in the Operating Agreement:

NAME  
IDA Q. FITZ

ADDRESS  
8611 Gold Cay  
West Palm Beach, FL 33411

**ARTICLE IV – TRANSFERABILITY OF MEMBERSHIP INTERESTS**

No member shall have the right to assign their membership interests in the Company without the prior written consent of all membership interests, unless otherwise provided for in the Company's Operating Agreement. If the assignment is not approved by all of the membership interests, the assignee shall have no right to become a member, to participate in management of the Company, or to exercise any other rights or powers of a member. The assignee shall merely be entitled to receive the share of profits and other distributions and the allocation of income, gain, loss deduction, credit or similar item to which the assignor was

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entitled, to the extent assigned.

\*\*\*\*\*

AWARENESS COUNSELING AGENCY, LLC  
A FLORIDA LIMITED LIABILITY COMPANY

The undersigned authorized representative of a member executed these Articles of  
Organization on June 3, 2011.

  
IDA Q. FITZ

Date 6/3/11

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

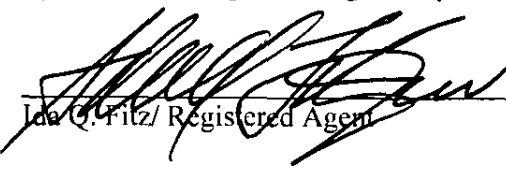
PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT DESIGNATING THE REGISTERED OFFICE/ REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is AWARENESS COUNSELING AGENCY, LLC.

The name and Florida address of the initial registered agent is:

IDA Q. FITZ  
8611 GOLD CAY  
WEST PALM BEACH, FL 33411

*Having been named as registered agent to accept service of process for the above stated limited liability corporation at the place designated in this certificate; I am familiar with and 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, Florida Statutes.*

  
Ida Q. Fitz/ Registered Agent

6/3/11  
Date

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