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FL DEPT. OF STATE COVER LETTER

REVISED June 22, 2011

TO:

Registration Section

Division of Corporations

SUBJECT: MANAGEMENT CONSULTING SERVICES OF MARIANNA
(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:

EDW.	ARD W. C.	AVANAUGH	
	(1	Name of Person)	•
	,		
	(1	Firm/Company)	
POB	ox 6344		
		(Address)	
MARI.	ANNA		28 Z
		State and Zip Code)	L AHE J
For further information of	concerning this matter, please c	all:	I JUN 28 CRETARYY AHASSEE
EDWARD	CAVANAUGH	at (850) 482	-4087 € œ
(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check fo	r 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	Street/Courier Addres	<u>s</u>

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Comp	pany is:	
MANAGEMENT	CONSULTING	SERVICES

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

ARTICLE II - Address:

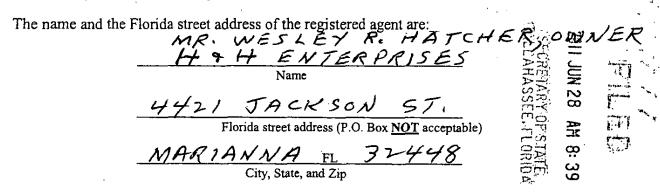
business entity with an active Florida registration.)

ARTICLE I - Name:

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

Principal Office Address:	Mailing Address:
	Mailing Address: C/O EDWARDW, CAVANAUGH POBOX 6344
YO EDWARD CAVANAUGH	POBOX 6344
4371 PEARL STI	MARIANNA FL 32447
MARIANNA FL 32448	

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



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)

RANDALL L. SMITH

Notary Public - State of Florida

My Comm. Expires Mar 18, 2014

Commission & DD 972520

Bonded Through National Notary Assn.

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 Member	and CANANAUCH
, •	EDWARD W. CAVANAUGH
MGRM	EDWARD W. CAVANAUGH POBOX 6344
	MARIANNA FL 32447
•	
•	
	
(Use attachment if necessary)	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 544 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.)

REQUIRED 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.)

EDWARD W. CAVANAUGH

P.O. BOX 5342 P.O. BOX 6547 P.O. BOX 6547

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)

RANDALL L. SMITH
Notary Public - State of Florida
My Comm. Expires Mar 18, 2014
Commission # DD 972520
Bonded Through National Natary Assn.