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(Re	questor's Name)		
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Special Instructions to Filing Officer:

A. LUNT

JUL -8 2011

**EXAMINER** 

Office Use Only



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## **COVER LETTER**

TO: Registration Division of	n Section Corporations		
SUBJECT: Wrei	nn Advisory Servic	es LLC.	
		ed Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corre	spondence concerning this matt	er to the following:	
Luther F	<u>Harrison Wrenn Jr</u>	•	
		Name of Person	
Wrenn A	Advisory Services		
-		Firm/Company	
1120 Ha	aymarket Dr.		
		Address	
Lakeland	/ Florida 33809		7 S 20
wrennadvi	sory@tampabay.rr.com	y/State and Zip Code  m for future annual report notification)	CRETAR LAHASS
For further information	on concerning this matter, please	•	SEE. F.
Luther H. Wren	nn Jr.	at ( 863 ) 430-9806 Area Code & Daytime Telep	OR O
Enclosed is a check \$125.00 Filing Fee	for the following amount: \$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 Corporations Clifton Building 2661 Executive Center Ci	rcle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	1 ~	Ν	a	m	e:
TC1	0.4				

The name of the Limited Liability Company is:

# Wrenn Advisory Services 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:		
1120 Haymarket Dr.	1120 Haymarket Dr.		
Lakeland, FL. 33809	Lakeland, FL 33809		
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address	own Registered Agent. You must designate an inc	t's Signature: lividual or another	
Luther Harrison	Wrenn Jr.	AS	
	Name	RY C	
1120 Haymarket		OF S	
Florida	street address (P.O. Box NOT acceptable)	TATE ORID	0
Lakeland	<sub>FL</sub> 33809	A M	
	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)

#### 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 Member	Name and Address:	ZOII JUI SEGRA TALL'AR
MGR	Luther Harrison Wrenn Jr. 1120 Haymarket Dr. Lakeland, FL. 33809	TARY OF STATE PLORID
(Use attachment if necessary)		

ARTICLE V: Effective date, if other than the date of filing: \( \sqrt{\omega\_0} \sqrt{\sqrt{20/1}} \). (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. 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.)

Luther Harrison Wrenn Jr.

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)