

L110000103245

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000221431 3)))



H110002214313ABCP

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : PURCELL, FLANAGAN & HAY, P.A.
Account Number : 071722000522
Phone : (904) 355-0355
Fax Number : (904) 355-0820

2011 SEP -8 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
11 SEP -8 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
LOVETT ALLEN PARTNERS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

A. LUNT

SEP -9 2011

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H11000221431 3

ARTICLES OF ORGANIZATION
OF
LOVETT ALLEN PARTNERS, LLC

The undersigned, for the purpose of forming a limited liability company under the laws of Florida, adopts the following Articles of Organization:

Article I
Name

The name of this limited liability company shall be:

LOVETT ALLEN PARTNERS, LLC

Article II
Principal Office and Mailing Address

The principal office and mailing address of this limited liability company shall be:

7220 FINANCIAL WAY, SUITE 400
JACKSONVILLE, FLORIDA 32256

Article III
Initial Registered Agent and Address

The name and street address of the initial registered agent of this limited liability company are:

LAURA HENRY ALLEN
7220 FINANCIAL WAY, SUITE 400
JACKSONVILLE, FLORIDA 32256

Article IV
Effective Date: Duration

4.1. **Effective Date.** The existence of this limited liability company shall commence on the date these Articles are executed.

4.2. **Duration.** This limited liability company shall terminate on the date set forth in its Operating Agreement.

Jonathan L. Hay, Esq.
Purcell, Flanagan, Hay & Greene, P.A.
1548 Lancaster Terrace
Jacksonville, Florida 32204
(904) 355-0355
Fla. Bar No.: 456586

H11000221431 3

FILED
2011 SEP -8 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H11000221431 3

Article V
Purposes

This limited liability company is organized for the purpose of transacting any or all lawful business permitted under the laws of the United States of America and of the State of Florida.

Article VI
Operating Agreement

The initial Operating Agreement of this limited liability company shall be adopted by the members. The Operating Agreement shall be adopted, altered, amended or repealed from time to time as provided in the Operating Agreement.

Article VII
Amendment

The members, by vote of members holding a majority of the interests in the limited liability company, shall have the right to amend or repeal any provision contained in these Articles of Organization.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on the 8th day of September, 2011.



LAURA HENRY ALLEN, Organizer

CLERK OF DISTRICT COURT
JULIA HENRY ALLEN
FLORIDA

2011 SEP -8 AM 11:02

FILED

H11000221431 3

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

LOVETT ALLEN PARTNERS, LLC

2. The name and the Florida street address of the registered agent are:

LAURA HENRY ALLEN
7220 FINANCIAL WAY, SUITE 400
JACKSONVILLE, FLORIDA 32256

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, Florida Statutes.



LAURA HENRY ALLEN
Registered Agent

2011 SEP -8 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED