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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

Lanita Gibson (Muhammad)

AUTHOMENTION BY PHONE TO

CORRECT Name of Company

THE 10/6/11 @ 11:09 am

COC. EXAM



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09/16/11--01020--032 **130.00

M SEP 16 PM 1: 09

WIII-48238

J. BRYAN

OCT -5 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE PROFESSIONAL PARALEGAL SERVICES, 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:

JANITA GIBSON	
J.L Nar	ne of Person
JHE PROFESSIONAL PARA	
Fin	m/Company
74 HICKORY ROAD	SE SE SE
	Address ET =
OCALA, FLORIDA 34472	SEE O
janitamuhammad@yahoo.com	ate and Zip Code
E-mail address: (to be used for fu	ture annual report notification)
For further information concerning this matter, please cal	l:
JANITA GIBSON	(352 264-0222
Name of Person	Area Code & Daytime Telephone Number
Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



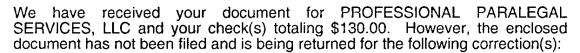
FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2011

JANITA GIBSON (MUHAMMAD) PROFESSIONAL PARALEGAL SERVICES, LLC 74 HICKORY ROAD OCALA, FL 34472

SUBJECT: PROFESSIONAL PARALEGAL SERVICES, LLC

Ref. Number: W11000048238



The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #K11042, PROFESSIONAL PARALEGAL SERVICES, INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 811A00021606

Joey Bryan Regulatory Specialist II FILED WING



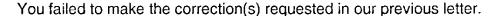
FLORIDA DEPARTMENT OF STATE Division of Corporations

September 28, 2011

JANITA GIBSON (MUHAMMAD) PROFESSIONAL PARALEGAL SERVICES, LLC 74 HICKORY ROAD OCALA, FL 34472

SUBJECT: THE PROFESSIONAL PARALEGAL SERVICES, LLC

Ref. Number: W11000048238



The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

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Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II SEP 16 PM 1:03

www.sunbiz.org

Letter Number: 511A00022313

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

J&L PROFESSIONAL PARALEGAL 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 Comparty is:

Principal Office Address:	Mailing Address:
JANITA GIBSON (MUHAMMAD)	74 HICKORY ROAD OCALA, FLORIDA 34472

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:

	0'- 0 17'
OCALA	_{FL} 34472
	Florida street address (P.O. Box NOT acceptable)
74 HIC	KORY ROAD
	Name
	
JANITA	GIBSON (MUHAMMAD)

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..

egistered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

化电子性电子电子管计划

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member		""
	JANITA GIBSON	70,70
MGRM	74 HICKORY ROAD	20
	OCALA, FLORIDA 34472	
	LEO MATHIS	, Gr
MGRM	74 HICKORY ROAD	•
	OCALA, FLORIDA 34472	
		
		
Use attachment if necessary)		
EV: Effective date, if other than the	no data of filing, 09/14/2011	(OPTION)
	be specific and cannot be more tha	(OPTION/

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.)

JANITA GIBSON (MUHAMMAD)

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)