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## **COVER LETTER**

Division of Con	rporations		
SUBJECT: Write	Works Consultin	g	
		ted Liability Compa	ny
The enclosed Articles of	Organization and fee(s) are	submitted for filing	,
Please return all correspo	ondence concerning this man	ter to the following:	
Christine	Tylor		
Christine	ı yıcı	Name of Person	
Write Wo	ks Consulting		
		Firm/Company	
3043 Valk	yrie Road		
	,	Address	
Middleburg,	<del></del>		
writeworksco	cı onsulting@gmail.co	ty/State and Zip Code	
	E-mail address: (to be used		1 notification)
For further information c	oncerning this matter, pleas	e call:	
Christine Tyler		at (904	400-2384
Name o	f Person		& Daytime Telephone Number
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registratio Division o Clifton Bu 2661 Exec	f Corporations

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	is:	EFFECTIVE DATE
Write Works Consulting, LLC	10-13-2011	
(Must end with the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
3043 Valkyrie Road Middleburg, FL 32068	3043 Valkyrie Road Middleburg, FL 32068	<u></u>
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registiness entity with an active Florida registration.)	ed Office, & Registered Agent's gistered Agent. You must designate an indiv	ridual or another
The name and the Florida street address of the	e registered agent are:	
Christine Tyler		OCT 14 PH 4: 30
Nam	ne	拉公主
3043 Valkyrie Ro	oad	
Florida street a	ddress (P.O. Box NOT acceptable)	6 A 0
Middleburg	<sub>FL</sub> 32068	Jan 1
City, S	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)

Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR Christine Tyler 3043 Valkyrie Road Middleburg, Florida 32068 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: 10 - 13 - 11. (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:** Christini Jyler 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.) Christine Tyler

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)

Typed or printed name of signee