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OCT 26 2011



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Founded 1909

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October 21, 2011

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

Re: Innnowledge Consulting, LLC

Dear Sir or Madam:

Enclosed you will find the original *Articles of Organization for Florida Limited Liability Company* for recording in your office, together with our firm's check in the amount of \$125.00 which represents the filing fee for same. Please time-stamp the additional copy provided and return in the enclosed self-addressed, stamped envelope.

Should you have any questions regarding the enclosed, please do not hesitate to call the undersigned.

Very truly yours,

David A. Groenke

DAG/vsd  
Enclosure  
cc: Mr. Glenn R. Wienkoop

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Innowledge Consulting, 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:

David A. Groenke

Name of Person

Firm/Company

221 E. 4th Street, Atrium Two, Suite 2000

Address

Cincinnati, Ohio 45202

City/State and Zip Code

dagroenke@vorys.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David A. Groenke

Name of Person

at ( 513 ) 723-4017

Area Code & 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 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 Circle  
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Innowledge Consulting, 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:

490 Harper Drive South  
Indian Rocks Beach, FL 33785

#### Mailing Address:

same

### 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:

Glenn R. Wienkoop

Name

490 Harper Drive South

Florida street address (P.O. Box **NOT** acceptable)

Indian Rocks Beach FL 33785

City, State, and Zip

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CLERK OF THE COURT

*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)

Glenn R. Wienkoop

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Glenn R. Wienkoop

490 Harper Drive South

Indian Rocks Beach, FL 33785

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

Glenn R. Wienkoop

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)**