# L11000125865

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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### **COVER LETTER**

TO:

	TO: Registration Section Division of Corporations					
	SUBJECT: BOOKKEEPER SERVICES FOR YOU 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:					
I	LINDA ROCHE  Name of Person					
ŀ	BOOKKEEPER SERVICES FOR YOU LLC					
Ī	Firm/Company					
	3118 BUTLER BAY DR. N.					
	Address					
	WINDERMERE, FL 34786					
	City/State and Zip Code					
	LROCHE9707@AOL.COM					
	E-mail address: (to be used for future annual report notification)					
	For further information concerning this matter, please call:					
	LIND	A ROCHE		at (407	909-9447	
		Name	e of Person	Area Code	& Daytime Telephone Number	
	Enclose	ed is a check t	for the following amount:			
\$125,00 Filing Fee \$\ \times \$130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee & Certificate of Status Certified Copy Certificate of Certified Copy Certif				y Certificate of Status &		
			Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 26, 2011

LINDA ROCHE 3118 BUTLER BAY DR. N. WINDERMERE, FL 34786

SUBJECT: BOOKKEEPER SERVICES LLC

Ref. Number: W11000054848

We have received your document for BOOKKEEPER SERVICES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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  $(850)\ 245-6067$ .

Neysa Culligan Regulatory Specialist II

Letter Number: 311A00024484

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

#### BOOKKEEPER SERVICES FOR YOU 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:		
3118 BUTLER BAY DR. N. WINDERMERE, FL 34786	3118 BUTLER BAY DR. N. WINDERMERE, FL 34786		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the registration.	stered Agent. You must designate an individual enother		
LINDA ROCHE			
Name	$\Xi_{i\alpha} =$		
3118 BUTLER BAY DR. N.			
Florida street add	AY DR. N.  dress (P.O. Box NOT acceptable)		
WINDERMERE	<sub>FL</sub> 34786		

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

## The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM LINDA ROCHE 3118 BUTLER BAY DR. N. WINDERMERE, FL 34786 (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 a rue. I am aware that any false information submitted in a document to the Department of safe. constitutes a third degree felony as provided for in s.817.155, F.S.) LINDA ROCHE 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)

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