

LI 2000072305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

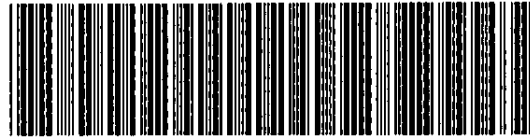
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 29 AM 8:52

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J. SAULSBERRY
EXAMINER

MAY 30 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C.I.P. Consulting Group, 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:

Wade Wilson
Name of Person

Wade Wilson, CPA, PA
Firm/Company

1517 W. Garden Street
Address

Pensacola, FL 32502
City/State and Zip Code

kevin.hubbard@cipconsulting.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Kevin Hubbard at (601) 606-7770
Name of Person 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:

C.I.P. Consulting Group, L.L.C.

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4 Portofino Drive, T4, Condo. #1807
Pensacola Beach, FL 32561

Mailing Address:

4 Portofino Drive, T4, Condo. #1807
Pensacola Beach, FL 32561

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's

Signature:

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

Kevin Hubbard

Name

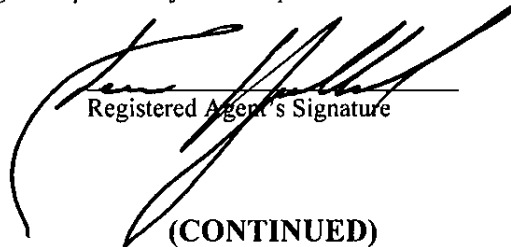
4 Portofino Drive, T4, Condo. #1807

Florida Street Address

Pensacola Beach, FL 32561

City, State, and Zip Code

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

(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

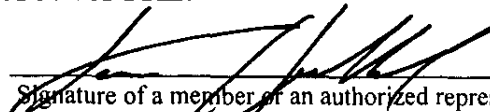
“MGRM” = Managing Member

Name and Address:

MGRM

Kevin Hubbard
4 Portofino Drive, T4, Condo. #1807
Pensacola Beach, FL 32561

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.)

Kevin Hubbard
Name of Signee

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TALLAHASSEE, FLORIDA