#L/2000194189

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
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SECRETANY OF STATE
TALLAHASSEE, 54-08/DA

K.SALY EXAMINER JUL 20 2012



June 28, 2012

FREDERIC SAMSON 4294 14TH LANE NE ST. PETERSBURG, FL 33703

SUBJECT: CONSCIOUS ENTREPRENEURSHIP INNOVATION (CEI), LLC

Ref. Number: W12000034827

We have received your document for CONSCIOUS ENTREPRENEURSHIP INNOVATION (CEI), LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly Regulatory Specialist II

Letter Number: 712A00017707

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Conscious Entrepreneurship Innovation (CEI), 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:

Frederic Samson	
1	Name of Person
Conscious Entrepreneursh	ip Innovation
	Firm/Company
4294 14th Lane NE	
	Address
St Petersburg, FL 33703	
City	/State and Zip Code
fsamson@mynnw.net	
E-mail address: (to be used fo	r future annual report notification)
For further information concerning this matter, please	call:
Frederic Samson	at (727 <u>432-0122</u>
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	В
\$125.00 Filing Fee \$\int \\$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	Street/Courier Address

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

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FLORIDALISM FED LIABILITY CONTACT		
ARTICLE I - Name: The name of the Limited Liability Company	is: EFFECTIVE DATE	
Conscious Entrepreneurship Innovation, LLC		
(Must end with the words "Limited Li	ability 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:	
4294 14th Lane NE St Petersburg, FL 33703	4294 14th Lane NE St Petersburg, FL 33703	
ARTICLE III - Registered Agent, Register	red 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:

Frederic Samson

Name

4294 14th Lane NE

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

St Petersburg

FL 33703

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..

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Frederic Samson 4294 14th Lane NE St Petersburg, FL 33703
(Use attachment if necessary) ARTICLE V: Effective date, if other that an effective date is listed, the date me or 90 days after the date of filing.)	an the date of filing: '7-/8-20/2. (OPTIONAL) nust be specific and cannot be more than five business days prior
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.)

Frederic Samson

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)