L12000119618

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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W12-45617

J. BRYAN

SEP 1 9 2012

FXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 4, 2012

BARB PETROSS 3231 WILSON BLVD. N NAPLES, FL 34120

SUBJECT: BENCHMARK, LLC Ref. Number: W12000045617



We have received your document for BENCHMARK, 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):

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".

The document number of the name conflict is #L06000106934, BENCHMARK, LLC.

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) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 712A00022359

COVER LETTER

TO: Registration Section Division of Corporations		·
SUBJECT: Benchmark Alliance Gr	oup, LLC	
	d Liability Company	
The enclosed Articles of Organization and fee(s) are s	ubmitted for filing.	FILL AMID: 31
Please return all correspondence concerning this matter	er to the following:	SEP
Barb Petross		O F
•	Name of Person	X 10:
		<u> </u>
	Firm/Company	ÿ.
3231 Wilson Blvd. N.	Address	
	Address	
Naples, FL 34120	/State and Zip Code	
bpetross@centurylink.net	·	
·	r future annual report notification)	
For further information concerning this matter, please	call:	
Barb Petross Name of Person	at (239) 404-1355 Area Code & Daytime Telephone	a Number
Name of Person	Area Code & Daytime Telephon	e Number
Enclosed is a check for the following amount:		
\$125.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Ce	60.00 Filing Fee, extificate of Status & extified Copy ditional 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:

Naples

Benchmark Alliance Group, 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:
Barb Petross	Barb Petross
3231 Wilson Blvd. N.	3231 Wilson Blvd. N.
Naples, FL 34120	Naples, FL 34120
	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another
The name and the Florida street address	ss of the registered agent are:
Barb Petross	
	Name
3231 Wilson	n Blvd N

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

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

_{FL} 34120

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:

"MGR" = Manager "MGRM" = Managing Member	
WORW — Managing Member	Name and Address: Barb Petross 3231 Wilson Blvd. N. Naples, FL 34120
MGRM	Barb Petross
	3231 Wilson Blvd. N.
	Naples, FL 34120
MGRM	Jeff Lackner
	3231 Wilson Blvd. N.
	Naples, FL 34120
The second secon	
(Use attachment if necessary)	
LE V: Effective date, if other than the	e date of filing: (OPTION
	be specific and cannot be more than five business da
days after the date of filing.)	
REQUIRED SIGNATURE:	
B	
	per or an authorized representative of a member.

constitutes a third degree felony as provided for in s.817.155, F.S.)

Barb Petross

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)