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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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EFFECTIVE DATE 01-01-13

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B. BOSTICK

OCT - 5 2012

EXAMINER

COVER LETTER

Division of Corpora	ntiens					
SUBJECT: Guiding L	ight Consulting	g Service	es			
	Name of Limited	Liability Com	pany			
The enclosed Articles of Orga	anization and fee(s) are sub	omitted for fili	ng.			
Please return all corresponder	nce concerning this matter	to the following	ng:			
Tracie L. Mit	tchem-Green					
		ame of Person				
	F	irm/Company				
295 NW Con	nmons Loop #11	15-105				
	· · · · · · · · · · · · · · · · · · ·	Address			 .	
Lake City, Flor	ida 32055			F	73	
		State and Zip Co	de	3. ·	<u> </u>	
	sultingservices@ya			G, i	1 1	F
E-	mail address: (to be used for	future annual re	port notification)	-		1
For further information conce	rning this matter, please ca	all:	•			,
Tracie L. Mitchem-G	reen	at (386	752-5461	Lokioa	<u>(၁</u> (၁	
Name of Per	son	Area Co	de & Daytime Tele	phone Number		
Enclosed is a check for the	following amount:					
	30.00 Filing Fee & ertificate of Status	\$155.00 Fil Certified C (additional co		\$160.00 Filing I Certificate of Sta Certified Copy (additional copy is c	atus &	
Re Di P.0	gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Registra Divisio Clifton 2661 E.	Courier Address ation Section n of Corporations Building xecutive Center (assee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Guiding Light Consulting Services, 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:		
295 NW Commons Loop #115-105 Lake City, Florida 32055	295 NW Commons Loop #115-10 Lake City, Florida 32055	<u>5</u>	
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address			NLS G th
Tracie L. Mitche	m-Green 5.	1	Hama ia
	Name C:		ة التيام
295 NW Com	mons Loop #115-105		j t j
Florida	street address (P.O. Box NOT acceptable)	13	
Lake City,	FL 32055	: (3 ::: (3	
	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>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGR	Tracia I. Mitaham Craan	
WGK	Tracie L. Mitchem-Green	
	295 NW Commons Loop #115-105 Lake City, Florida 32055	
	Lake City, Florida 32033	
	 	
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),
(Use attachment if necessary)		
•		
CLE V: Effective date, if other than th	e date of filing: January 1, 2013 . (OPTION	NAL)
effective date is listed, the date must l	be specific and cannot be more than five business d	ays į
90 days after the date of filing.)		
Q ,		
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.)

Tracie L. Mitchem-Green

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)