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DIVISION OF CORFORMING 57

C. LEWIS 0CT - 9 2012 EXAMINER

# COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Bradshaw Boyd Sustainability Advisors, 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: Leslie Camp Bradshaw Name of Person Bradshaw Boyd Sustainability Advisors, LLC Firm/Company 510 Pheasant Run Address Ponte Vedra Beach, FL 32082 City/State and Zip Code campbboyd@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Leslie Camp Bradshaw Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$155.00 Filing Fee & **√** \$160.00 Filing Fee, \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street/Courier Address **Mailing Address** Registration Section Registration Section Division of Corporations **Division of Corporations** 

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FO	R FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Compar	ny is:
Bradshaw Boyd Sustainabi	ility Advisors, LLC
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of t  Principal Office Address: 510 Pheasant Run Ponte Vedra Beach, FL 32082	the principal office of the Limited Liability Company is:  Mailing Address:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	
Leslie Camp Brads	snaw 🚣 😙

Name

510 Pheasant Run

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

**Jacksonville** 

FL 32082 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..

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE DIVISION OF CORPORATION

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

The name and address of each Manager or Managing Member is as follows:

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MGR	Leslie Camp Bradshaw	
	510 Pheasant Run	
	Ponte Vedra Beach, FL 32082	
TI - 4		
Use attachment if necessary)		
EV: Effective date, if other than t	he date of filing: (O	PTION#

**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.)

Leslie Camp Bradshaw

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)