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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to I	Tillian Office	

A. LUNT

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EXAMINER

Office Use Only



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COVER LETTER

TO: **Registration Section Division of Corporations** SUBJECT: Sustainable Business Development Services, 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: David L. Blackwell Name of Person Sustainable Business Development Services, LLC Firm/Company 1694 Glen Abby LN Address Winter Haven, FL 33881 City/State and Zip Code ut1dlb@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: David L. Blackwell **,** 662-5327 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

business entity with an active Florida registration.)

Sustainable Business Development 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:
1694 Glen Abby LN	1694 Glen Abby LN
Winter Haven, FL 33991	Winter Haven, FL 33881

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

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

David L. Blackwell

Name

1694 Glen Abby LN

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

Winter Haven

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.

hd L. Pladewell

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

MGR	David L. Blackwell 1694 Glen Abby LN
	Winter Haven, FL 33881
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	<u> </u>
(Use attachment if necessary)	
• /	he date of filing: November 1, 2012 . (OPTIO

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.)

David L. Blackwell

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)