## 12000160998

(	Requestor's Name)			
(Address)				
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(	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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FILED 2 DEC 20 PM 3: 5 COVERLETTER

TO:	Registration S Division of Co			
SIIRI		Sigras Consulting Servi	ices, LLC	
SUBJECT:Name of Limited Liability Company				
The e	nclosed Articles o	f Organization and fee(s) are s	submitted for filing.	
Please	return all corresp	ondence concerning this matte	er to the following:	
	Denis Bigras	S	•	
			Name of Person	
	Denis Bigras Consulting Services			
	Firm/Company			
	211A, 14100 River Road			
	····		Address	
	Pensacola, Florida 32507			
	denis.bigras	Cit @gmail.com	ty/State and Zip Code	
	<del></del>	E-mail address: (to be used )	for future annual report notification)	
For fu	rther information	concerning this matter, please	e call:	
Denis Bigras			850 582-7711	
	Name	of Person	at () Area Code & Daytime Telephone Number	
Enclo	osed is a check f	or the following amount:		
<b>3</b> \$125	5.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy	
		•	(additional copy is enclosed)	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Conrier 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:				
Denis Bigras Consulting Services, LLC				
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
211A, 14100 River Road	211A, 14100 River Road			
Pensacola, FL 32507	Pensacola, FL 32507			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the re	red Agent. You must designate an individual or another			
Denis Bigras	Sister of agont are.			
Name				
211A, 14100 River Road				
Florida street address (P.O. Box NOT acceptable) Pensacola, FL 32507 FL				
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 Signatur	ire (REQUIRED)			
(CONTINU	JED)			
Page 1 of 2				

MINITALE IT- Manager(5) of Managing Memori(3). The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Denis Bigras 211A, 14100 River Road Pensacola, FL 32507 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: January 1, 2013 \_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

**Denis Bigras** 

- \$ 30.00 Certified Copy (Optional)
- S 5.00 Certificate of Status (Optional)

Typed or printed name of signee