12000161346

(Re	questor's Name)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Ви	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
DEC 2 8 2012		
L. SELLERS		
 		

Office Use Only



400242942394

12/21/12--01024--005 **125.00

12 DEC 21 PH 3: 31
REGRETARY OF STATE

COVER LETTER

TO:

Registration Section
Division of Corporations

SURJECT: IL

Turpin Consulting 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:

Patti Turpin
Name of Person
Turpin Consulting LLC
Firm/Company
1917 Victory Palm Drive
Address
Edgewater FL 32141
City/State and Zip Code
patti47@cfl.rr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patti Turpin	_at (386 _ 2146747
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 Certificate of Status Certified Cope (additional copy)

□\$155.00 Filing Fee & □ \$160.00 Filing Fee,
Certified Copy
(additional copy is enclosed)

\$\sum_{\text{substitute}} \text{\$\sum_{\text{substitute}}} \text{\$\sum_{\text{certified}} \text{\$\sum_{\text{certified}}} \text{\$\sum_{\text{certified}} \text{\$\sum_{\text{certified}}} \text{\$\sum_{\text{certified}} \text{\$\sum_{\text{certified}}} \text{\$\sum_{\text{certified}} \text{\$\sum_{\text{certified}}} \text{\$\sum_

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 Comp	any is:	
Turpin Consulting LLC		
(Must end with the words "Limit	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address or	f the principal office of the Limited	l Liability Company is:
Principal Office Address:	Mailing Address:	
1917 Victory Palm Drive	1917 Victory Palm Drive	
Edgewater FL 32141	Edgewater FL 32141	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.) The name and the Florida street address of Patti Turpin	wn Registered Agent. You must designate an in	
 	Name	
1917 Victory Paim Drive		
	street address (P.O. Box NOT acceptable)	ı
Edgewater	_{FL} 32141	
	City, State, and Zip	
Having been named as registered agent liability company at the place designaregistered agent and agree to act in this all statutes relating to the proper and and accept the obligations of my position	nted in this certificate, I hereby acce is capacity. I further agree to compl complete performance of my duties,	pt the appointment as ly with the provisions of and I am familiar with
(CC	's Signature (REQUIRED) ONTINUED) age 1 of 2	FILE PH STORE TALLABASSEE, FO

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Patti Turpin 1917 Victory Palm Drive Edgewater FL 32141 (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.) Patti Turpin 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)