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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
FEB 1 5 2013					
L. SELLERS					

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13 FEB 14 AM 9: 00 SECRETARY OF STATE ALL ARASSET OF BRID.

COVER LETTER

TO:	Registration S Division of Co				
SUBJE	Duet	Consulting, L	_LC		
SUDJE			ed Liability Com	pany	
The en	closed Articles o	f Organization and fee(s) are	submitted for fili	ng.	
Please	return all corresp	ondence concerning this matt	er to the followir	ng:	
	Pristy D	Ouet Hendren			
			Name of Person		
			Firm/Company		
	10 SE 1	11th Street			
			Address		
	Pompa	no Beach, FL	33060		
		_	y/State and Zip Co	ode	
-	pristyduet	E-mail address: (to be used to	for future annual re	port notification)	
For fur	ther information	concerning this matter, please	call:		
Pri	stv Due	t Hendren	954	933-3	168
	<u> </u>	of Person	_ at (Area Co	de & Daytime Tele	phone Number
Enclos	sed is a check for	or the following amount:			
■ \$125.	.00 Filing Fee	☐\$130.00 Filing Fee & Certificate of Status	Certified C	_	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Section 1	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Clifton 2661 E	Courier Address ation Section on of Corporations Building xecutive Center Cossee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Duet Consulting, LLC				
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")	•		
ARTICLE II - Address:				
The mailing address and street address of the pri	ncipal office of the Limited Liab	oility Co	ompai	ny is:
Principal Office Address:	Mailing Address:			
10 SE 11th Street	10 SE 11th Street			
Pompano Beach, FL 33060	Pompano Beach, FL 33060			
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 respective prints of the Prints	ered Agent. You must designate an individu			
Name				
40 05 44th Owner				
10 SE 11th Street Florida street add	ress (P.O. Box NOT acceptable)			
Pompano Beach 33060				
<u></u>	FL te, and Zip			
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacital statutes relating to the proper and complete and accept the obligations of my position as registered Agent's Signature.	his certificate, I hereby accept the ity. I further agree to comply with e performance of my duties, and it gistered agent as provided for in	e appoin h the pro I am fan	ntmeni ovisio niliar	t as ons of with
(CONTIN		SECRETA	13 FEB 1	
r age r or a	•	-/17-	_	*

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Pristy Duet Hendren
	10 SE 11th Street
	Pompano Beach, FL 33060
	
(Use attachment if necessary)	
VCV E V. Decaring data is allow than the	. (OPTIONAL)
CLE v: Effective date, if other than to	the date of filing: (OPTIONAL)
r to or 90 days after the date of filing.	ust be specific and cannot be more than five business (
•	•
REQUIRED SIGNATURE:	
Pul	> Bull .
Signature of a mem	iber or an authorized representative of a member.
(In accordance with section 6	

Pristy Duet Hendren

constitutes a third degree felony as provided for in s.817.155, F.S.)

I am aware that any false information submitted in a document to the Department of State

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)