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(F	Requestor's Name)	
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K. SALY EXAMINER MAR 2 7 2013 (850) 245-6051.

COVER LETTER

TO:

Registration Section Division of Corporations

ADKON Security Consulting, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all corresp	ondence concerning this matt	er to the following:	
Melissa	Stops		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
Incorpo	rating Service	es, Ltd.	
		Firm/Company	
		Address	
Tallaha	ssee, FL 3230	01	
		y/State and Zip Code	
radiv@inc		for future annual report notification)	
For further information of	concerning this matter, please	·	
Melissa		656-79	
Name	of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check for	or the following amount:		
■\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Address	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADKON Security Consulting, LLC	nited Liability Company, "L.I.C.," or "LI.C.")
(Must end with the words) En	med Latertly Company. Lance. Of the.
ARTICLE II - Address:	
The mailing address and street address	of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
804 McIntosh Street	804 McIntosh Street
West Palm Beach, FL 33405	West Palm Beach, FL 33405
ARTICLE III - Registered Agent, Re(The Limited Liability Company cannot serve as its	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street addres	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
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ARTICLE III - Registered Agent, Re(The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street addres Incorporating Services,	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Ltd. Name
ARTICLE III - Registered Agent, Re(The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street addres Incorporating Services,	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Ltd. Name
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street addres Incorporating Services, 1540 Glenway Drive	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Ltd. Name

Registered Agent's Signature (RECVIRED)
Melissa A. Stops, Assistant Secretary

(CONTINUED)

Page 1 of 2

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 Membe	er
MGR	Adam O. Konesey
	804 McIntosh Street
	West Palm Beach, FL 33405
(Use attachment if necessary)	
CLE V: Effective date, if other t	than the date of filing: (OPTIONAL
effective date is listed, the dat	te must be specific and cannot be more than five business
o or 90 days after the date of fi	iling.)
REQUIRED SIGNATURE:	
	Adam O Konesey
Signature of a	a member or an authorized representative of a member.
(In accordance with sec	ction 608.408(3), Florida Statutes, the execution of this document ion 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.)

Adam O. Konesey

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)