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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 15, 2013

TERESA L WINELAND BREAKTHROUGH REGULATORY CONSULTING GROUP 3369 DOYLE HAWKINS RD NAVARRE, FL 32566

SUBJECT: BREAKTHROUGH REGULATORY CONSULTING GROUP, LLC

Ref. Number: W13000015442



We have received your document for BREAKTHROUGH REGULATORY CONSULTING GROUP, LLC and your check(s) totaling \$238.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We didn't get the 2nd page of form,

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 113A00006196

Documentation Completed

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Breakthmough Regulatory Consulting Group, uc Fine Name of Limited Liability Company	ハニィ
The enclosed Articles of Organization and fee(s) are submitted for filing.	Ì
Please return all correspondence concerning this matter to the following:	١
Teresa L. Wineland Name of Person	
Breakthrough Regulatory Consulting Group	
3369 Doyle Hawking Road	
Marawe, FL 3251do  City/State and Zip Code	
Hw4199@mail. Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
1eresa Wineland at (3H ) 215.8675  Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR I	FLORIDA LIMITED LIABILITY COMBANY
ARTICLE I - Name: The name of the Limited Liability Company i	SECRETARIAN 29
Breakthrough Propletory Commended with the words "Limited Lia	bility Company M.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:
3369 Doyle Hawkins Road Navarre FL 32566	3319 Doyle Howkins Road novome, FL 32016
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Terree L. Wineic	and
3369 Doyle Howk	ddress (P.O. Box NOT acceptable)
Novare, FL 325 City, S	lolo FL State, and Zip
liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and compl	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of ete performance of my duties, and I am familiar with registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
TARR-TIW3/26/13	Brad thomas Willneston Tiw 31
	R29
	TORDE TO THE
(Use attachment if necessary)	
CLE V: Effective date, if other than	
CLE V: Effective date, if other than effective date is listed, the date m	ust be specific and cannot be more than five business day
CLE V: Effective date, if other than effective date is listed, the date m o or 90 days after the date of filing	ust be specific and cannot be more than five business day
CLE V: Effective date, if other than effective date is listed, the date mo or 90 days after the date of filing   REQUIRED SIGNATURE:  Signature of a men constitutes an affirmation un I am aware that any false interested in the constitutes any false interested.	nust be specific and cannot be more than five business day  .)

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)