

L13000051862

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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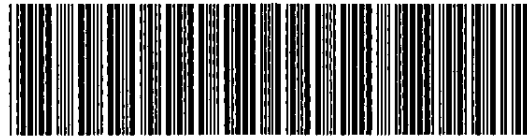
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR -9 2013

J. BRYAN

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Skitch T. Holland Consulting Services, 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:

Evelt L. Simmons

Name of Person

GREENSPOON MARDER, P.A.

Firm/Company

145 N.W. Central Park Plaza, Suite 200

Address

Port St. Lucie, Florida 34986

City/State and Zip Code

Skitch.holland@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Evelt L. Simmons

Name of Person

at (**772**) **873-5904**

Area Code & Daytime Telephone Number

Enclosed is a check for 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

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

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ARTICLES OF ORGANIZATION

ARTICLE I NAME

The name of the Limited Liability Company is SKITCH T. HOLLAND CONSULTING SERVICES, LLC.

ARTICLE II ADDRESS

Principal Office Address:

2447 S.W. Bridgeview Terrace
Palm City, Florida 34990

Mailing Address:

2447 S.W. Bridgeview Terrace
Palm City, Florida 34990

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ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Skitch T. Holland
2447 S.W. Bridgeview Terrace
Palm City, FL 34990

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, Florida Statutes.


SKITCH T. HOLLAND
Registered Agent's Signature

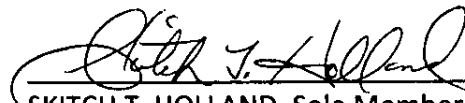
**ARTICLE IV
MANAGER OR MANAGING MEMBER**

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

<u>Title</u>	<u>Name and Address</u>
Manager	Skitch T. Holland 2447 S.W. Bridgeview Terrace Palm City, FL 34990

**ARTICLE V
EFFECTIVE DATE**

The effective date of this limited liability company is the date of filing. 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, Florida Statutes.



SKITCH T. HOLLAND, Sole Member

Date: April 1, 2013

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**