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### **COVER LETTER**

TO:

Registration Section Division of Corporations

A&R MANAGEMENT & CONSULTING SERVICES, LLC

SUBJECT:

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:

### YVETTE J. HARRELL

Name of Person

### THE LAW OFFICES OF YJ HARRELL

Firm/Company

### 320 WEST OAKLAND PARK BLVD

Address

### **WILTON MANORS, FL 33311**

City/State and Zip Code

## COUNSEL@YHLEGAL.COM

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

For further information concerning this matter, please call:

YVETTE HARRELL

954

990-7328

Name of Person

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
A&R MANAGEMENT & CONSULTING SERVICES	LLC	
(Must end with the words "Limited Liabi	lity Company, "L.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:	
2970 NW 166TH STREET	2970 NW 166TH STREET	
MIAMI GARDENS, FL 33054	MIAMI GARDENS, FL 33054	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  YVETTE J. HARRELL  Name  320 WEST OAKLAND PARK BLVD  Florida street address (P.O. Box NOT acceptable)  WILTON MANORS  FL 33311  City, State, and Zip		
liability company at the place designated in registered agent and agree to act in this capac all statutes relating to the proper and comple	accept service of process for the above stated limited this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of the performance of my duties, and I am familiar with egistered agent as provided for in Chapter 608, F.S	

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(CONTINUED)

# ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGRM ANDRE T. RAGIN 2970 NW 166TH STREET MIAMI GARDENS, FL 33054

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: SEPTEMBER 25, 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 of an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes are 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.)

YVETTE J. HARRELL

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)