

L13000143250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

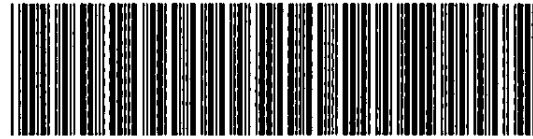
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2017 OCT -9 PM 12:46
CLERK OF STATE
TAMMASEE FLORIDA

OCT 10 2013

D. BRUCE

W13-55588



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 7, 2013

BARBARA A. MACWILLIAM
2195 NORTH KINGS HIGHWAY
FORT PIERCE, FL 34951

SUBJECT: MACWILLIAM GROUP LLC
Ref. Number: W13000055588

We have received your document for MACWILLIAM GROUP LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 213A00023473

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DIVISION OF CORPORATIONS
FLORIDA

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(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MacWilliam Group 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:

Barbara A. MacWilliam

Name of Person

MacWilliam Group LLC.

Firm/Company

2195 North Kings Highway

Address

Fort Pierce, Florida 34951

City/State and Zip Code

bmacw5@gmail.com

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

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TALLAHASSEE FLORIDA

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For further information concerning this matter, please call:

Barbara A. MacWilliam

Name of Person

at (**772**) **538-9575**

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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FILED
July 19, 2012
Sec. Of State
jshivers

Article VI

The name and address of the incorporator is:

LINDSEY MACWILLIAM
220 21ST STREET
P09
MIAMI BEACH, FL 33139

Electronic Signature of Incorporator: LINDSEY M. MACWILLIAM

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
LINDSEY M MACWILLIAM
220 21ST STREET #09
MIAMI BEACH, FL. 33139

Article VIII

The effective date for this corporation shall be:

07/19/2012

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TALLAHASSEE FLORIDA

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CLSC

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MacWilliam Group LLC.

(Must end with the words "Limited Liability 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:

2195 North Kings Highway

Fort Pierce, Florida 34951

2195 North Kings Highway

Fort Pierce, Florida 34951

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:

Barbara A. MacWilliam

Name

2195 North Kings Highway


Florida street address (P.O. Box **NOT** acceptable)

Fort Pierce

FL

City, State, and Zip

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, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

Name and Address:

MGRM	Barbara A. MacWilliam
	2195 North Kings Highway
	Fort Pierce, Florida 34951
MGR	Lindsey MacWilliam
	221 Jefferson Avenue
	Miami Beach, Florida 33139

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:

Barbara A. MacWilliam
Signature of a member or an authorized representative of a member.

(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, F.S.)

Barbara A. MacWilliam

Typed or printed name of signee

DEPARTMENT OF STATE
 FLORIDA
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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)