

L14000083001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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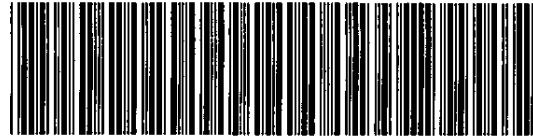
(Business Entity Name)

(Document Number)

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2014 MAY 22 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. G. G. MAY 14 2014

DARBY & PEELE

A PARTNERSHIP INCLUDING PROFESSIONAL ASSOCIATIONS

HERBERT F. DARBY, P.A.
RICHARD E. STADLER, P.A.
JOSHUA D. CRAPPS, P.A.
BONNIE S. GREEN, P.A.

ATTORNEYS AT LAW

May 6, 2014

285 N.E. HERNANDO AVENUE
POST OFFICE DRAWER 1707
LAKE CITY, FLORIDA 32056
TELEPHONE (386) 752-4120
FACSIMILE (386) 755-4569

W. RODERICK BOWDOIN
(1949-2008)
S. AUSTIN PEELE
(1938-2011)

8236.06-14-113

Florida Department of State
Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

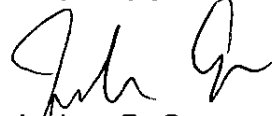
Gentlemen:

Enclosed are two executed counterparts of Articles of Organization of L. D. Linguistic & Consulting Services, LLC to be filed in your office.

Also enclosed is our trust account check in the amount of \$155.00 to cover the filing fee, designation of registered agent and certified copy. Please certify one of the enclosed counterparts and return it to us at your early convenience.

Thank you.

Very truly yours,



Joshua D. Crapps

For the firm

joshuadcrapps@darbypeele.com

JDC:dbb

Enclosures

cc: Ms. Laureine Dice (w/encls. via email)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2014

DARBY & PEELE, ATTORNEYS AT LAW
POST OFFICE DRAWER 1707
LAKE CITY, FL 32056

SUBJECT: L.D. LINGUSTIC & CONSULTING SERVICES, LLC
Ref. Number: W14000030481

We have received your document for L.D. LINGUSTIC & CONSULTING SERVICES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 414A00010357

JDC:dbb
8236.06-14-113
05/05/14; 05/20/14 (rev)

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2014 MAY 22 PM 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
L. D. LINGUSTIC & CONSULTING SERVICES, LLC**

The undersigned, being a member of the limited liability company being formed under Revised Limited Liability Company Act, Chapter 605, Florida Statutes, hereby adopts the following articles of organization:

I.

The name of the limited liability company is:

L. D. Lingustic & Consulting Services, LLC

(hereinafter the "Company").

II.

The Company shall have perpetual existence, unless dissolved by operation of law.

III.

The street address of the principal office of the Company is 15297 29th Road, Lake City, Florida 32024, and the mailing address is the same.

IV.

The name and street address of the initial registered agent in the State of Florida for the Company is LAUREINE DICE, 15297 29th Road, Lake City, Florida 32024. By signing these articles of organization, the registered agent voluntarily consents to serve as registered agent of the Company and acknowledges that he is familiar with the obligations and duties of a registered agent as required by law and hereby accepts those duties and responsibilities.

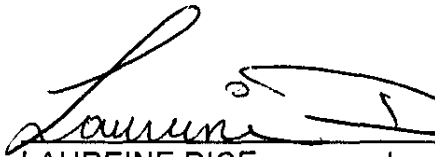
V.

The unanimous consent of all members shall be required to admit additional members, which shall be in accordance with the terms and conditions of the operating agreement of the Company.

VI.

None of the members of the Company are liable for the payment of any debt, obligation or other liability of the Company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 6th day of May, 2014.


LAUREINE DICE, as member
and registered agent

STATE OF FLORIDA

COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 6th day of May, 2014, by LAUREINE DICE, who is personally known to me, or who has produced N/A, as identification.


Notary Public, State of Florida

(NOTARIAL SEAL)

Delores B. Brannen
(Print or Type Name)

My Commission Expires:

