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K.SAL? EXAMINER LUN 192014

COVER LETTER

SUBJECT: Fundamento	ul Legal Somitted Liability Company	ev vices, LLC
The enclosed Articles of Organization and fee(s) a	are submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	
Sheila Cr	Name of Person	
Fundamen	Hal Legal	Services, LL
3404 Perio	violde Cou	x+#106
Palm Beach	City/State and Zip Code	S, FL 33401
fundamental	ed for future annual report notific	mation) (Le) M
For further information concerning this matter, ple	ease call:	
Sheila Crawford at (Area Code Daytime Te	8374 Rephone Number
Enclosed is a check for the following amount:		
\$125.00 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 Adduss	Street/Course Add	wasa

Registration Section
Division of Corporations

TO:

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

ARTICLE I - Name:
The name of the Limited Liability Company is: Fundamental legal Services (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:
3404 Periwinkle Court Folm Beach Gardens, Fl 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: Shela Crawford Name Block Periwinkle Court # 1010 Florida street address (P.O. Box NOT acceptable) City 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 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	She la Crautral 3404 Periumte (aut #106 Palm Beach Grendens, FC 3
(Use attachment if necessary)	
EV: Effective date, if other than ective date is listed, the date must of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 da
EV: Effective date, if other than ective date is listed, the date must of filing.)	date of filing: . (OPTIONAL)
EV: Effective date, if other than	date of filing: . (OPTIONAL)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)