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SEGRETARY OF STATE
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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Lee Clark Coaching and C	onsulting, L.L.C. e of Limited Liability Company	
The enclosed Articles of Organization and	fee(s) are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Nelson Lee Clark	Name of Person	
Lee Clark Coaching and Co	nsulting, L.L.C.	
	Firm/Company	
1250 S. Miami Avenue #230	Address	
Miami, FL 33130		V-
	City/State and Zip Code  City/State and Zip Code  City/State and Zip Code	ee ii
<u>leeclark@learn2livenow.com</u> E-mail address: (to	be used for future annual report notification)	*** *
For further information concerning this mat	tter, please call:	
Lee Clark Name of Person	at (786 ) 352-1871 ST Area Code Daytime Telephone Number	
Enclosed is a check for the following amou	nt:	
☑ \$125.00 Filing Fee ☐ \$130.00 Filing F Certificate of St		
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

(N	Must end with the words "Lim	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Addres The mailing address and		pal office of the Limited Liability Company is:
Principal Office Addr	ress:	Mailing Address:
1250 S. Miami Avenu Miami, Fl. 33130	ue #2305	1250 S. Miami Avenue #2305 Miami, FL 33130
(The Limited Liability of another business entity		,
	Nelson Lee Clark	
		lame
	1250 S. Miami Avenue #2	<del></del>
	Florida street address (P.O.	. Box NOT acceptable)
	Miami	FL 33130
	City	Zip
		pt service of process for the above stated limited liability company at

(CONTINUED)

Page 1 of 2

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SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE

Title:	Name and Address:
"AMBR" = Authorized Meml "MGR" = Manager	ber
AMBR	Nelson Lee Clark
	1250 S. Miami Avenue #2305
	Miami, FL 33130
	· ·
(Use attachment if necessary)	
EV: Effective date, if other the certive date is listed, the date of filing.)	nan the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 days
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REQUIRED SIGNATURE:  Signature (In accordance with constitutes an affirm	are of a member or an authorized representative of a member. The section 605.0203 (1) (b), Florida Statutes, the execution of this document mation under the penalties of perjury that the facts stated herein are true.
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