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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJI	ECT: Mike Standley Consulting LLC Name of Lin	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this m	natter to the following:	
	Michael G. Standley	Name of Person	
	Mike Standley Consulting LLC	Firm/Company	
	292 Shoreline Drive	company	
		Address	
	Freeport, Florida 32439	City/State and Zip Code	<del>,, , , , , , , , , , , , , , , , , , ,</del>
<u>_d</u> s	standley292@cox.net E-mail address: (to be use	ed for future annual report notifica	ation)
For fur	ther information concerning this matter, ple	ase call:	
Micha	el G. Standley at (  Name of Person	850 ) 880-6307 Area Code Daytime Tel	lephone Number
Enclos	ed is a check for the following amount:		
<b>☑</b> \$125.0	00 Filing Fee \$\times \text{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	Street/Courier Add Registration Section Division of Corporat	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tailahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Mike Standley Consulting 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 pr	incipal office of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
292 Shoreline Drive	292 Shoreline Drive	
Freeport, Florida 32439	Francis Florida 20400	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve a		an individual or
ARTICLE III - Registered Agent, Registered	l Office, & Registered Agent's Signature: s its own Registered Agent. You must designate	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve a	l Office, & Registered Agent's Signature: s its own Registered Agent. You must designate egistration.)	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve a another business entity with an active Florida re	l Office, & Registered Agent's Signature: s its own Registered Agent. You must designate egistration.)	2914 OC SECOND
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve a another business entity with an active Florida ro	l Office, & Registered Agent's Signature: s its own Registered Agent. You must designate egistration.)	2914 OC SECOND
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve a another business entity with an active Florida re	I Office, & Registered Agent's Signature: s its own Registered Agent. You must designate egistration.) registered agent are:	2914 OC SECOND
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as another business entity with an active Florida re The name and the Florida street address of the r  Michael G. Standley  292 Shoreline Drive	I Office, & Registered Agent's Signature: s its own Registered Agent. You must designate egistration.) registered agent are:	2914 OC SECOND
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as another business entity with an active Florida re The name and the Florida street address of the r  Michael G. Standley  292 Shoreline Drive	I Office, & Registered Agent's Signature: s its own Registered Agent. You must designate egistration.) registered agent are:  Name	

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.

M; W/ / / Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Attalian I O Otan diam
AMBR	Michael G. Standley
	292 Shoreline Drive
	Freeport, Florida 32439
<del></del>	
(Use attachment if necessary)	
	October 10, 2014 MS
	October 10, 2014 MS of filing: October 1. 2014 (OPTIONAL)
CLE V: Effective date, if other than the date ffective date is listed, the date must be spe	OCTOBER 10, 2014 MS of filing: October 1, 2014 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days
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CLE V: Effective date, if other than the date ffective date is listed, the date must be spee of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men (In accordance with section 60)	of filing: October 1. 2014 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days  mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document
CLE V: Effective date, if other than the date ffective date is listed, the date must be speed of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men (In accordance with section 60) constitutes an affirmation under	of filing: October 1. 2014 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days  mber or an authorized representative of a member.

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)