

L 15000098749

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(Business Entity Name)

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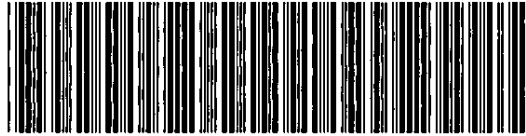
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W15-37381 Not Avail

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05/22/15--01021--008 **160.00

EFFECTIVE DATE
6-4-2015

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 JUN -8 PM 12:49

FILED

K. SALY
EXAMINER
JUN -9 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 27, 2015

CHARLES ROGER SEARLE
96000 OVERSEAS HWY, APT. L2
KEY LARGO, FL 33037

SUBJECT: SOUTHERN CONSULTING SERVICE, LLC.
Ref. Number: W15000037381

RECEIVED
15 JUN -8 PM 3: 31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SOUTHERN CONSULTING SERVICE, LLC. and your check(s) totaling \$160.00. 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 since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L11000081574 "SOUTHERN CONSULTING SERVICES LLC".

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 015A00011123

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ~~Southern Consulting Service~~ FLORIDA KEYS CONSULTING SERVICE, 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:

Charles Roger Searle

Name of Person

~~Southern Consulting Service.~~

Firm/Company

96000 Overseas Highway, Apt. L.2.

Address

Key Largo, Florida. 33037.

City/State and Zip Code

panasea@msn.com

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

For further information concerning this matter, please call:

Charles R. Searle

985

502-0312

at ()

Name of Person

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 Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

EFFECTIVE DATE
6-4-2015

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~Southern Consulting Service, LLC.~~ FLORIPA KEYS CONSULTING SERVICE, 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:

96000 Overseas Highway, Apt. L2.
Key Largo.
Florida. 33037.

96000 Overseas Highway, Apt. L2.
Key Largo.
Florida. 33037.

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:

Charles Roger Searle
Name
96000 Overseas Highway, Apt. L2.
Florida street address (P.O. Box **NOT** acceptable)
Key Largo. Florida 33037
City State Zip

FILED
2015 JUN -8 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..

Charles Roger Searle
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Charles Roger Searle
96000 Overseas Highway, Apt. L2.
Key Largo, Florida. 33037.

MGR

Joni Levite-Searle
96000 Overseas Highway, Apt. L2
Key Largo, Florida. 33037.

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 05/19/2015 06/04/15 (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

Charles Roger Searle

Typed or printed name of signee

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)