

L15000195189

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

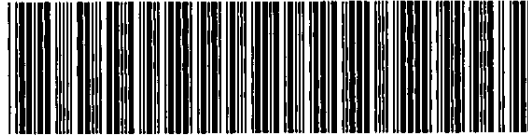
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 NOV -9 PM 4: 04

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AND  
FILED

141

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Fry Advisory Consulting Services 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:

Lyndall Carvell Fry

Name of Person

Fry Advisory Consulting Services LLC

Firm/Company

817 Grenada Lane

Address

Little Torch Key, FL 33042

City/State and Zip Code

LYNDALLFACS@GMAIL.COM

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

For further information concerning this matter, please call:

Lyndall Carvell Fry

Name of Person

at ( 512 ) 761-2211

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/Courier Address**

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY NOV -9 PM 4:04

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Fry Advisory Consulting Services 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:**

817 Grenada Lane  
Little Torch Key, FL 33042

817 Grenada Lane  
Little Torch Key, FL 33042

**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.)

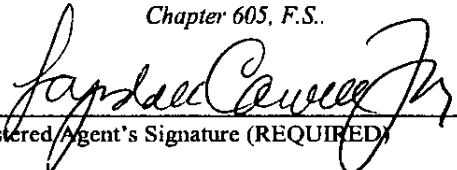
The name and the Florida street address of the registered agent are:

Lyndall Carvell Fry  
Name

817 Grenada Lane  
Florida street address (P.O. Box **NOT** acceptable)

Little Torch Key FL 33042  
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..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Fry Advisory Consulting Services LLC  
817 Grenada Lane  
Little Torch Key, FL

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**INITIAL LIST OF MEMBERS**

The following named person(s) shall constitute the initial members of Fry Advisory Consulting Services LLC:

Lyndall Carvell Fry  
817 Grenada Lane  
Little Torch Key, FL 33042

Joe Fry  
817 Grenada Lane  
Little Torch Key, FL 33042

  
Lyndall Carvell Fry, Organizer

Nov 5 2015  
Date