

**L16000034890**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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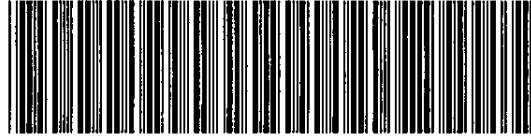
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

N. OUBEN FEB 22 2016

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** BARRY MURDOCK GROUP 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:

JOHN GENTILE, CPA  
Name of Person  
JOHN GENTILE, CERTIFIED PUBLIC ACCOUNTANT  
Firm/Company  
1601 N PALM AVE., SUITE 212  
Address  
PEMBROKE PINES, FLORIDA 33026  
City/State and Zip Code  
BARRYLM50@BELLSOUTH.NET  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN GENTILE, CPA      954      431-8331  
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)

*\$155.00 previously submitted*

**Mailing Address**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



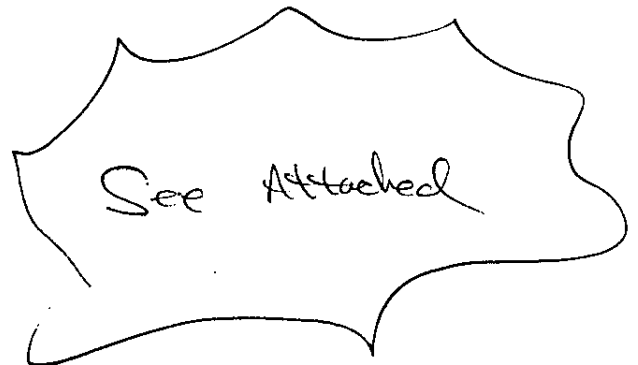
RECEIVED FEB 16 REC'D

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 28, 2016

JOHN GENTILE, CPA  
1601 N. PALM AVENUE, STE 212  
PEMBROKE PINES, FL 33026

SUBJECT: MURDOCK GROUP LLC  
Ref. Number: W16000006151



*MURDOCK GROUP LLC*

We have received your document for MURDOCK GROUP LLC and your check(s) totaling \$155.00. 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 the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The registered agent must sign accepting the designation.

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) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 016A00001914

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BARRY MURDOCK GROUP 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:

4155 GRIFFEN ROAD  
DANIA BEACH, FLORIDA 33314

Mailing Address:

4155 GRIFFEN ROAD  
DANIA BEACH, FLORIDA 33314

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:

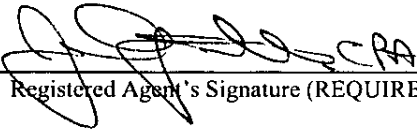
JOHN GENTILE, CPA  
Name

1601 N PALM AVE., SUITE 212  
Florida street address (P.O. Box **NOT** acceptable)

PEMBROKE PINES, FLORIDA 33026  
City State Zip

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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..*

  
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:**

BARRY L MURDOCK

4155 GRIFFIN ROAD

DANIA BEACH, FLORIDA 33314

MGR

SUSAN MURDOCK

4155 GRIFFIN ROAD

DANIA BEACH, FLORIDA 33314

MGR

MAX MURDOCK

4155 GRIFFIN ROAD

DANIA BEACH, FLORIDA 33314

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 1/10/16. (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:**

*Barry L Murdock*

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Barry L. Murdock

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)

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