Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000092935 3)))



H160000929353ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAW OFFICES OF SANFORD M. REINSTEIN, P.A.

Account Number : 120130000013 Phone : (954)792-1925 Fax Number : (954)792-1926

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Sreinstein @ lawsmr. com

FLORIDA LIMITED LIABILITY CO. Beverly Perkins Consulting Services, LLC

<u> </u>	
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

APR 15 PH 3-2

Electronic Filing Menu

Corporate Filing Menu

Help

4/18/10



April 15, 2016

FLORIDA DEPARTMENT OF STATE

LAW OFFICES OF SANFORD M REINSTEIN, P.A.

SUBJECT: BEVERLY PERKINS CONSULTING SERVICES, LLC

REF: W16000028124

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section FAX Aud. #: H16000092935 Letter Number: 216A00007859

FILE.D 16 APR 15 PM 1:31

ARTICLES OF ORGANIZATION

OF

BEVERLY PERKINS CONSULTING SERVICES, LLC

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act.

- 1. Name: The name of the limited liability company is Beverly Perkins Consulting Services, LLC.
- 2. Duration: The Company shall exist from the date of the filing of these Articles with the Secretary of State until the occurrence of any of the events specified in Florida Statutes, unless continued by the unanimous consent of all of the remaining members.
- Mailing Address and Street Address: The Company's mailing address is .P.O. Box 5748, Lighthouse Point, FL 33074 and street address is 1516 NW 6th Ave., Pompano Beach, FL 33060.
- 4. Registered Agent and Office: The name of the initial registered agent of the Company is Beverly Perkins.
 - The street address of the initial registered agent of the company is: 1516 NW 6th Avc., Pompano Beach, FL 33060.
- 5. Additional Members: Additional members to the Company may be admitted, but only if all the current members agree to the admission of the additional members and to the terms of admission.
- 6. Termination of Membership: If a member of the Company dies, retires, resigns, is expelled, is dissolved, experiences bankruptcy, or upon the occurrence of any other event which terminates the continued membership of member in the Company, the remaining members may, by unanimous written agreement, continue the business of the Company.
- 7. Management of the Company: The following person will be the day-to-day manager and hence the company will be manager -managed: Beverly Perkins.
- 8. Regulations: The members shall have the power to adopt, alter, amend, or repeal regulations of the Company containing provisions for the regulation and management of the affairs of the Company.
- 9. Existence: The existence of the Company shall commence on the date of filing of the Articles of Organization by the Florida Secretary of State.

The undersigned executed these Articles of Organization on April 2016,

Beverly Perkins., 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 and 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.)

CERTIFICATION OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the Provisions of Section 605.0113, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designation of the Registered Office/Registered Agent, in the State of Florida.

- 1. The name of the Limited Liability Company is: Beverly Perkins Consulting Services, LLC.
- 2. The name and address of the Registered Agent and office is: Beverly Perkins. 1516 NW 6th Ave., Pompano Beach, FL 33060.

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 provision 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.

Dated: April 8, 2014

Beverly Perkins, Member

Beverly Perkins Consulting Services, LLC.