

L/6000085354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

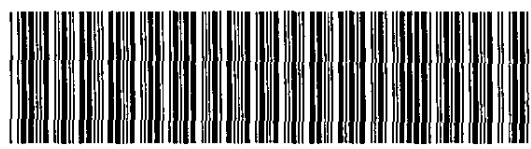
Certified Copies _____ Certificates of Status _____

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Office Use Only

W/6000023506

MAY 04 2016
T. SCOTT



200283592042

03/24/16--01018--025 **130.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAY -3 PM 12:40



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 15, 2016

THOMAS O MURPHY
9401 SINGLETON DRIVE
BETHESDA, MD 20817

SUBJECT: MURPHY CONSULTING ENGINEERS, LLC
Ref. Number: W16000023506

We have received your document for MURPHY CONSULTING ENGINEERS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Member must sign.,

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.

Tyrone Scott
Regulatory Specialist II

Letter Number: 616A00006519

RECEIVED
16 MAY -3 AM 7:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTED: 16 MAY 2016 10:11 AM
16 MAY 2016 10:11 AM

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Murphy Consulting Engineers, 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:

9401 Singleton Drive

Bethesda, MD 20817

Mailing Address:

9401 Singleton Drive

Bethesda, MD

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:

REGISTERED AGENTS INC.

Name

3030 N. Rocky Point Dr., STE 150A

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

Tampa, FL 33607

City

State

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.

Bill Havre

Bill Havre/Secretary/Registered Agents Inc.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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DIVISION OF CORPORATIONS
16 MAY -3 PM 12:41

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:

Thomas O. Murphy

9401 Singleton Drive

Bethesda, MD 20817

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March 15, 2016 (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:

 04/25/12
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.

Thomas O. Murphy

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)