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EFFECTIVE DATE 04/25/16

2 07/07/16

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Power Up Consulting Firm, 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:
Molly Rattigan Name of Person
PowerUp Consulting Firm, LLC
348 Broward Rd Address
Tacksonville, FL 32218  City/State and Zip Code  Powerup Consulting from @gmail. Com  E-mail address: (to be used for future armual report potification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Molly Ratigan at (757) 288-6371  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{Certificate of Status}\$\$130.00 Filing Fee \$\times \text{Certified Copy} \text{(additional copy is enclosed)}\$\$ \$160.00 Filing Fee, Certificate of Status \$\times \text{Certified Copy} \text{(additional copy is enclosed)}\$\$ \$160.00 Filing Fee, Certified Copy \text{(additional copy is enclosed)}\$\$
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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Power up Consulting Firm, LU  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	

**ARTICLE I - Name:** 

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
348 Browned Rd	348 Broward Rd
Jacksonville, PL 32218	Jacksonville, PL
	32218

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:

MOILY	Rattigo	un
,	Name	•
<u>348</u> 8	Broward	Rd
Florida street address	(P.O. Box NOT acc	ceptable)
Jackson	ville, Fr	32218
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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
***************************************	
Molly Rath gan = AMBR	348 Browlard Rd Jacksonville, Fr 32218
Molly Rathigan = AMBR Chris Rathigan = AMBR	248 Broward Rd Jacksonville, Fr 32218
(Use attachment if necessary)	
` "	(100)11
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The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-