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(Re	equestor's Name)	
(Ac	dress)	
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(Cir	ty/State/Zip/Phon	e #)
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SECRETARY OF STATE TALLAHASSEE FLORID

#### **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJI	ECT: <u>Timothy B. Ferguson Educationa</u> Name of Li	d Consultant LLC mited Liability Company	_
The en	closed Articles of Organization and fee(s) a	are submitted for filing.	
Please	return all correspondence concerning this n	natter to the following:	
	Timothy Brian Ferguson	Name of Person	
	Timothy B. Ferguson Educational	Consultant LLC Firm/Company	
	5818 Inverness Circle	Address	
	N. Ft. Myers, FL 33903	/ Cold Coo	SECRET
		City/State and Zip Code	
	mFerguson1@gmail.com E-mail address: (to be use ther information concerning this matter, ple	ed for future annual report notification) case call:	2016 JUN     PH  2: 36
Timot	hy Brian Ferguson at ( Name of Person	239 ) 465-9420 Area Code Daytime Telephone Numb	per
_	ed is a check for the following amount:		
<b>☑ \$12</b> 5.0	O Filing Fee \$\Bigcup \text{\$130.00 Filing Fee & Certificate of Status}\$	(additional copy is enclosed) Certified	te of Status &
	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	

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited L	iability Company is:		
Timothy B. Ferguson Ed	ducational Consultant L	LC	
(Mus	t end with the words "Lim	ited Liability Company, "L.L.C.," or	-"LLC.")
ARTICLE II - Address:			
The mailing address and st	reet address of the princip	al office of the Limited Liability Cor	npany is:
Principal Office Address	<u>.</u>	Mailing Address:	
5818 Inverness Circle		5818 Inverness Circle	1
N. Ft. Myers, FL 33903		N. Ft. Myers, FL 33903	
(The Limited Liability Cor another business entity wi The name and the Florida	npany cannot serve as its o th an active Florida registr		ignate an individual or
		ame	
58	18 Inverness Circle		2016 JUN 11
	orida street address (P.O.	Box NOT acceptable)	SSR I
<u>N.</u>	Ft. Myers	FL 33903	
	City	Zip	25 Z
the place designated in capacity. I further agree	this certificate, I hereby ac to comply with the provision amiliar with and accept the	ot service of process for the above state copt the appointment as registered at ons of all statutes relating to the prope obligations of my position as register hapter 605, F.S	gent and agree to act in this er and complete performance

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Timothy Brian Ferguson 5818 Inverness Circle
	N. Ft. Myers, FL 33903
effective date is listed, the date must be	ate of filing:
CLE V: Effective date, if other than the date	ate of filing:
CLE V: Effective date, if other than the date effective date is listed, the date must be the of filing.) CLE VI: Other provisions, if any.	ate of filing:
CLE V: Effective date, if other than the date effective date is listed, the date must be the of filing.) CLE VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 day
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CLE V: Effective date, if other than the date effective date is listed, the date must be the of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a 1 (In accordance with section constitutes an affirmation ur	Swand Sergeen Ed. D. S.
CLE V: Effective date, if other than the date effective date is listed, the date must be the of filing.)  CLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a matter of	Swand Sergeen Ed. D. S.
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CLE V: Effective date, if other than the date effective date is listed, the date must be the of filing.)  CLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a matter of	member or an authorized representative of a member.  605.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true.  formation submitted in a document to the Department of States in the penalties of perjury that the facts stated herein are true.  The formation submitted in a document to the Department of States in the penalties of perjury that the facts stated herein are true.  The formation submitted in a document to the Department of States in the penalties of perjury that the facts stated herein are true.
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## Timothy B. Ferguson Educational Consultant LLC 5818 Inverness Circle N. Ft. Myers, FL

### **INITIAL LIST OF MEMBERS**

The following named person(s) shall constitute the initial members of Timothy B. Ferguson Educational Consultant LLC:

Timothy Brian Ferguson 5818 Inverness Circle N. Ft. Myers, FL 33903

Timithe Brian Suguen Ed. D.

Date