

L16000137249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

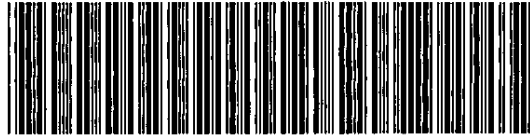
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500287924505

07/15/16--01008--009 \*\*130.00

FILED  
16 JUL 15 AM 9:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

7/15/16

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Ardent Transcription 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:

Lois A Brewer

Name of Person

Ardent Transcription LLC

Firm/Company

180 Raintree Drive

Address

Orange City, FL 37263

City/State and Zip Code

Loisab511@yahoo.com

E mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lois A Brewer

Name of Person

at ( 407 ) 756-0900

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee  
*No fee*

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

*NO Fee*  
☒ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**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 Liability Company is:

Ardent Transcription 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:**

180 Raintree Drive  
Orange City, FL 37263

**Mailing Address:**

180 Raintree Drive  
Orange City, FL 37263

**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:

Lois A Brewer

Name

180 Raintree Drive

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

Orange City

City

FL 37263

Zip

FILED  
16 JUL 15 AM 9:45  
SECRETARY OF STATE  
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

MGR

**Name and Address:**

Lois A Brewer  
180 Raintree Drive  
Orange City, FL 37263

16 JUL 15 AM 9:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing:

.(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.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

*Lois A Brewer*

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

Lois A Brewer

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)**

Ardent Transcription LLC  
180 Raintree Drive  
Orange City, FL

**INITIAL LIST OF MEMBERS**

The following named person(s) shall constitute the initial members of Ardent Transcription LLC:

Lois A Brewer  
180 Raintree Drive  
Orange City, FL 37263

Lois A Brewer  
Lois A Brewer, Organizer

07/12/2016  
Date

FILED  
16 JUL 15 AM 9:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA