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Florida Department of State
Division of Corporations
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Account Number : 076635001571
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 APR 19 AM 12:50

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Email Address: kwikdraw49@att.net

FLORIDA LIMITED LIABILITY CO.

iPro Accounting, LLC.

Certificate of Status	0
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Page Count	04
Estimated Charge	\$125.00

APR 20 2017
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No. 2591 P. 2

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ARTICLES OF ORGANIZATION
FOR
iPro Accounting, LLC.
a Florida Limited Liability Company

FILED
2017 APR 19 AM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a limited liability company under and pursuant to the Revised Limited Liability Company Act, Chapter 605, *Florida Statutes*, does hereby adopt the following Articles of Organization for such Company:

ARTICLE I

Name

The name of this Company shall be iPro Accounting, LLC. ("the Company").

ARTICLE II

Duration

The term of existence of the Company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE III

Mailing Address

The mailing address for the Company is 605 Devon Street, Port Orange, Florida 32127. The street address for the Company is 605 Devon Street, Port Orange, Florida 32127.

ARTICLE IV

Registered Agent and Office

The name and street address of the initial Registered Agent and office for the Company is:

MICHAEL G. COX
605 Devon Street
Port Orange, Florida 32127

ARTICLE V

Admission of Additional Members;
Terms and Conditions of such Admissions

Additional Members may be admitted upon unanimous consent of the Members of the Company, upon the written application of such new Member, in the manner set forth in the Operating Agreement of this Company.

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ARTICLE VI
Right to Continue Business

If, but for the exercise of the right to continue the Company's business, as specified below, the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member, or the occurrence of any other event which terminates the continued membership of a Member in the Company, shall cause the dissolution of the Company, then the business of the Company shall continue (without dissolution) if elected, in writing, within ninety (90) days of the occurrence of such event by any remaining Member.

ARTICLE VII
Management by Member(s)

The Company will be managed by its Members. The name and address of the initial Managing Members are:

MICHAEL G. COX
605 Devon Street
Port Orange, Florida 32127

BROOKE M. LINEBERRY
605 Devon Street
Port Orange, Florida 32127

ARTICLE VIII
Regulations of Company

The power to adopt, alter, amend or repeal the Operating Agreement of the Company shall be vested in the Members.

ARTICLE IX
Informal Action of Members

Any action of the Members may be taken without a meeting if consent in writing setting forth the action so taken shall be signed by all Members who would be entitled to vote upon such action at a meeting and filed with the Company as part of its records.

ARTICLE X
Transferability of Member's Interest

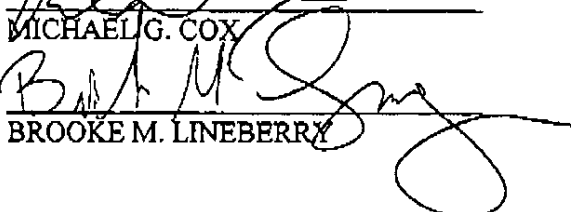
An interest of a Member of this Company may be transferred or assigned only to such extent and in the manner provided in the Operating Agreement.

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IN WITNESS WHEREOF, the undersigned has hereunto set his hand this 19th day of April, 2017.


MICHAEL G. COX


BROOKE M. LINEBERRY

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 19th day of April, 2017, by MICHAEL G. COX and BROOKE M. LINEBERRY, who (✓ one) ☒ are each personally known to me or _____ produced _____ as identification.

(SEAL)


NOTARY PUBLIC

Print Name of Notary
My Commission Expires

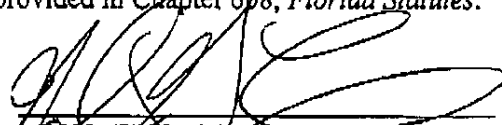


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STATEMENT OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above-stated limited liability company, I, MICHAEL G. COX, 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 in Chapter 608, *Florida Statutes*.


MICHAEL G. COX

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 19th day of April, 2017, by MICHAEL G. COX, who (✓ one) ☒ is personally known to me or _____ produced _____ as identification.

(SEAL)


NOTARY PUBLIC

Print Name of Notary RAYMOND A. MCLEOD
Commission # FF 952211
My Commission Expires March 25, 2020
Send Us Your Feedback 800-385-7010

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