

L17000092744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

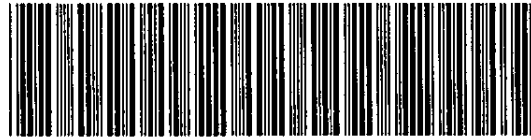
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300297363423

04/26/17--01032--005 **125.00

FILED
17 APR 26 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Law Offices of Timothy K. Anderson
TIMOTHY K. ANDERSON, ESQ.
480 Maplewood Drive, Suite 5
Jupiter, Florida 33458

Brent E. Carrington
Real Estate Closer

Lorraine A. Hinkle
Legal Assistant

April 25, 2017

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

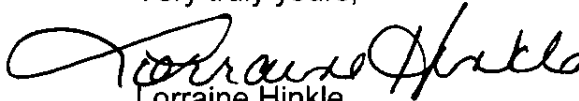
Re: Filing of Articles of Organization for Florida Limited Liability Company
Florida Design and Consulting, LLC

To Whom it May Concern:

Enclosed please find the original and one copy of the cover letter and executed Articles of Organization of the above referenced Florida Limited Liability Company, along with check no. 10880 for filing fee in the sum of \$125.00, and a self-addressed, stamped envelope for return of filed documents.

Thank you for your assistance in this matter. If you have any questions please contact the undersigned at the above number.

Very truly yours,



Lorraine Hinkle,
Legal Assistant to
Timothy K. Anderson

TKA/lah

Enclosures
Federal Express No.7789 8211 3839

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: FLORIDA DESIGN AND CONSULTING, 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:

JAN JACKSON

Name of Person

FLORIDA DESIGN AND CONSULTING, LLC.

Firm/Company

801 SEAFARER CIRCLE, APT. 203

Address

JUPITER, FLORIDA 33477

City/State and Zip Code

jajack2690@yahoo.com

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

For further information concerning this matter, please call:

JAN JACKSON

561-

714-0612

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 Filing Fee &
Certificate of Status



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



\$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(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

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLORIDA DESIGN AND CONSULTING, LLC.

(Must contain 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:

801 SEAFARER CIRCLE, APT. 203
JUPITER, FL 33477

Mailing Address:

801 SEAFARER CIRCLE, APT. 203
JUPITER, FL 33477

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:

TIMOTHY K. ANDERSON

Name

480 MAPLEWOOD DRIVE, SUITE 5

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

JUPITER

FL

33458

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)

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TALLAHASSEE, FLORIDA

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:

JAN JACKSON

801 SEAFARER CIRCLE, APT. 203

JUPITER, FL 33477

(Use attachment if necessary)

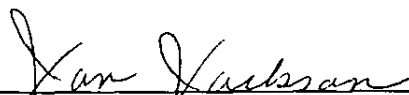
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

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:



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.

JAN JACKSON

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)