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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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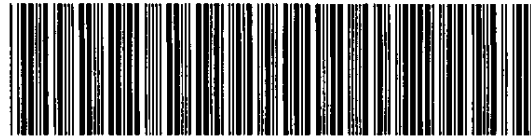
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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† ADMITTED IN DISTRICT OF COLUMBIA
†† ADMITTED IN NORTH CAROLINA
• ADMITTED IN WASHINGTON
•• ADMITTED IN VIRGINIA

June 6, 2017

Via Certified Mail
Return Receipt Requested

New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Fulton Bros Consulting, LLC

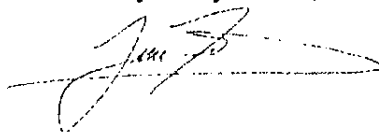
To Whom It May Concern:

Enclosed please find the following:

1. Cover Letter
2. Articles of Organization; and
3. Check in the amount of \$130.00 for filing fee.

If you have any questions, please do not hesitate to contact our office.

Very Truly Yours,



Jesse S. Fulton

JSF/ctr
Enclosures (as noted)

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Fulton Bros 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:

Jesse Fulton
Name of Person

Fulton Bros Consulting LLC
Firm/Company

2100 SW 16th Terrace
Address

Fort Lauderdale, FL 33315
City/State and Zip Code

Fultonjessc12@gmail.com
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jesse Fulton at (954) 439-1511
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:

Fulton Bros 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:

Mailing Address:

2100 SW 16th Terrace
Fort Lauderdale, FL 33315

2100 SW 16th Terrace
Fort Lauderdale, FL 33315

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:

Jesse Fulton

Name

2100 SW 16th Terrace

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

Fort Lauderdale FL

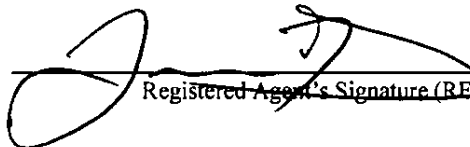
33315

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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17 JUN -9 AM 10:18
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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

MGR

AMBR

Name and Address:

Kyle Fulton

13980 SW 33rd ct

Davie, FL 33315

Jesse Fulton

2100 SW 16th Terrace

Fort Lauderdale, FL 33315

Cody Fulton

13980 SW 33rd ct

Davie, FL 33330

(Use attachment if necessary)

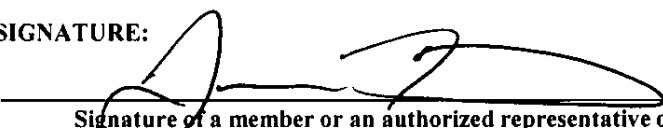
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

Jesse Fulton

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)

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