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(Address)

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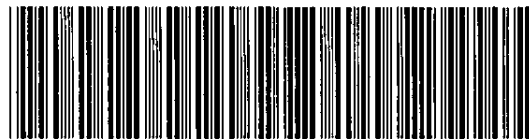
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TALLAHASSEE, FLORIDA

M. MOON
JUN 22 2017

COVER LETTER

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

SUBJECT: Montford and Associates, 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:

Ronald G. Meyer, Esquire

Name of Person

Meyer, Brooks, Demma and Blohm, P.A.

Firm/Company

Post Office Box 1547

Address

Tallahassee, Florida 32302

City/State and Zip Code

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

For further information concerning this matter, please call:

Jen Blohm

850

878-5212

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

17 SEP 21 PM 0:10

ARTICLES OF ORGANIZATION

FOR

MONTFORD AND ASSOCIATES, L.L.C.

The undersigned subscribes to these Articles of Organization for the purpose of forming a Limited Liability Company, which shall become effective upon filing of these Articles with the Secretary of State.

ARTICLE I

The name of the Limited Liability Company is "Montford and Associates, LLC"

ARTICLE II

The mailing address and street address of the principal office of the Limited Liability Company is:

2433 Shalley Drive
Tallahassee, Florida 32308

ARTICLE III

The name and the Florida street address of the registered agent are:

Katherine Montford Peters, Registered Agent
2433 Shalley Drive
Tallahassee, Florida 32308

ARTICLE IV

The name and address of the Managing Member are as follows:

Katherine Montford Peters, Managing Member
2433 Shalley Drive
Tallahassee, Florida 32308

17 JUN 21 10:56:00

The name and address of the Members and their ownership interests are as follows:

Katherine Montford Peters 100%
2433 Shalley Drive
Tallahassee, Florida 32308

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ARTICLE V

The purpose for which this Limited Liability Company is formed is to conduct any lawful business permitted under the laws of the United States or of the State of Florida.

IN WITNESS WHEREOF, in accordance with Section 605, Florida ~~includes~~ the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Katherine M. Peters
Katherine Montford Peters

VERIFICATION

STATE OF FLORIDA)

COUNTY OF LEON)

The foregoing instrument was acknowledged before me this 21st day of June, 2017, by Katherine Montford Peters ☐ who is personally known to me OR ☒ who provided a valid driver's license as identification.

WITNESS my hand and seal in the County and State named above on this 21st day of June, 2017.

Darlene M. Aldrich
NOTARY PUBLIC

Notary Public: Darlene M. Aldrich
Printed Name

My Commission Expires:



ACCEPTANCE BY REGISTERED AGENT

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, Florida Statutes.



Katherine Montford Peters
Registered Agent

Date: June 21, 2017

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