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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name if the Limited Liability Company is:

Butler's Business Consulting and Legal Services, L.L.C.

ARTICLE II- Address:

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

Principal Office Address:

Mailing Address is:

809 ½ West Warren Street Plant City, Florida 33563

809 ½ West Warren Street Plant City, Florida 33563

ARTICLES III- Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the Registered Agent are:

Stephanie Butler 809 ½ West Warren Street Plant City, Florida 33563

Having been named as registered agent and to except 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 provision 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

SECRETARY OF SIAME

Page 2 of 3

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The name and address of each person authorized to manage and control the limited Liability Company:

"MGR" -Manager /
Administrator

Stephanie Butler 809 ½ West Warren Street Plant City, Florida 33563

"AMBR"- Authorized Member

Spencena Dalmas 602 East Alexander Street, Building 700, Apt# 703 Plant City, Florida 33563

ARTICLE V: Effective date, if other than the date of filing: _____, (optional)
Effective upon certification of company.

ARTICLE VI: Other provision, if any.

Provide professional services to all clients, Paralegals/Legal Assistants, Grant Writer's, training personnel, Office Managers, Finance Managers, Marketing Managers, Computer Technicians, assist with all aspects of business development to all clients.

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SECRETARY OF STATE
TALLAHASSEE ET DENE

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 Statues, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony for in s.817.155, F.S.

Stephane Butler
Stephanie Butler

SECRETANT OF STATE

TALLAHASSEE, FLORID

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