

L18 0000 86 848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100311815881

100311815881  
04/11/18--01001--024 \*\*155.00

RECEIVED  
DEPARTMENT OF STATE  
18 APR 10 PM 4:07

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 APR 11 PM 3:05

# AUSLEY McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

123 SOUTH CALHOUN STREET  
P.O. BOX 391 (ZIP 32302)  
TALLAHASSEE, FLORIDA 32301  
(850) 224-9115 FAX (850) 222-7560  
Writer's Direct Line: (850) 425-5457

April 10, 2018

Secretary of State  
2661 Executive Center Circle West  
Tallahassee, Florida 32301

**VIA HAND DELIVERY**

Re: **Praxeology, LLC**

Dear Madam/Sir:

Enclosed are an original and one copy of the Articles of Organization for **Praxeology, LLC**, a limited liability company. These Articles include Registered Agent and Registered Office designation for this company. Also enclosed is our check in the amount of:

☐ \$125.00  
Filing Fee

☐ \$130.00  
Filing Fee &  
Certificate of Status

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

☐ \$160.00  
Filing Fee,  
Certified Copy &  
Certificate of Status  
(additional copy enclosed)

Please do not hesitate to call me at (850) 425-5457 if you have any questions.

Thank you in advance for your usual assistance in these matters.

Sincerely,



Donna Marie Walters, FRP  
Florida Registered Paralegal

/dmw  
Enclosures

**ARTICLES OF ORGANIZATION  
OF  
PRAXEOLOGY, LLC**

The undersigned, pursuant to the provisions of Chapter 605, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.  
Name**

The name of the Limited Liability Company is **Praxeology, LLC**.

**ARTICLE 2.  
Address**

The street address of the place of business in Florida is:

123 South Calhoun Street  
Tallahassee, Florida 32301-1517

The mailing address of the place of business in Florida is:

P.O. Box 391  
Tallahassee, Florida 32302-0391

**ARTICLE 3.  
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

**Ausley & McMullen, P.A.**  
123 South Calhoun Street  
Tallahassee, Florida 32301-1517

*Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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.*

s/Elizabeth D. Barron, for the Firm  
Elizabeth D. Barron, for the Firm, Registered Agent

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 APR 11 PM 3:05

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 10th day of April, 2018.

***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 Section 817.155, F.S.***

s/Elizabeth D. Barron

**Elizabeth D. Barron**

Authorized Representative of the Member

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 APR 11 PM 3:05