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T SCHROEDER

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

July 12, 2018

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

VIA HAND DELIVERY

Re: **Meteoropathy, LLC**

Dear Madam/Sir:

Enclosed are an original and one copy of the Articles of Organization for **Meteoropathy, 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

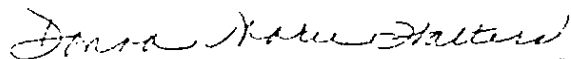
☒ \$155.00
Filing Fee &
Certified Copy
(additional copy enclosed)

☐ \$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

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**ARTICLES OF ORGANIZATION
OF
METEOROPATHY, 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 **Meteoropathy, 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

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**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

**ARTICLE 4.
Management**

The Limited Liability Company shall be managed by at least one Manager and is, therefore, a Manager-managed company. The name and address of the person authorized to manage and control the Limited Liability Company are as follows:

**GEORGIANA GORMLEY
KALAHAR, Manager**

123 South Calhoun Street
Tallahassee, Florida 32301-1517

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 12th day of July, 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 a Member

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