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Division of Corporations Electronic Filing Cover Sheet

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Account Name : FL PATEL LAW PLLC Account Number : 120170000097 : (727)279-5037 Phone

: (727)888-1294 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ____Laderrickadams@yahoo.com

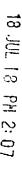
FLORIDA LIMITED LIABILITY CO.

Adams Security Group LLC

Certificate of Status	1
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COVER LETTER

7/18/2018

To: New Filing Section
Division of Corporation

Subject: <u>Adams Security Group LLC</u> 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:

Kalpesh J. Patel, Esq. FL Patel Law PLLC 360 Central Avenue 8th Floor St. Petersburg, Florida 33701 Fax: 727-888-1294

E-mail address: <u>kalpesh@flpatellaw.com</u> (to be used for annual report notification)

For further information concerning this matter, please call or e-mail:

Kalpesh Patel at 727-279-5037 or e-mail at contact@flpatellaw.com

Enclosed is our fax filing coversheet for \$130.00 for Filing Fee & Certificate of Status

FL Patel Law PLLC

17278881294

Articles Of Organization

For

Adams Security Group LLC

A

Florida Limited Liability Company

ARTICLE I

Name

The name of the Limited Liability Company is: Adams Security Group LLC (the Company).

ARTICLE II

Address

The mailing address and street address of the principal office of the Company is 11507 Dr. Martin Luther King Jr. Blvd. #414, Mango, FL 33550.

ARTICLE III

Registered Agent, Registered office, & Registered Agent's Signature:

The name and the Florida Street Address of the Registered Agent are:

Kalpesh J. Patel 360 Central Avenue #800 Saint Petersburg, FL 33701

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..

(sign)

(CONTINUED)

Kalpesh Patel

(Page 1 of 2)

ARTICLE IV:

The Name and Address of each person authorized to manage and control the Limited Liability Company:

Title	Name and Address	
AMBR = Authorized Member MGR = Manager		
AMBR	<u>Laderrick Adams</u> 11507 Dr. Martin Luther King Jr. Blvd. #414 Mango, FL 33550	

ARTICLE IV:

	The Effective	date shall be the da	ate of filing.
		dee	(sign)
This docum	nent is executed in accordant that any false informat	ordance with section 60:	sentative of a member. 5.0203 (1) (b), Florida Statutes, ment to the Department of State for in s.817.155, F.S.
		Laderrick Adams	
	Authorize	ed Representative/I	Member

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