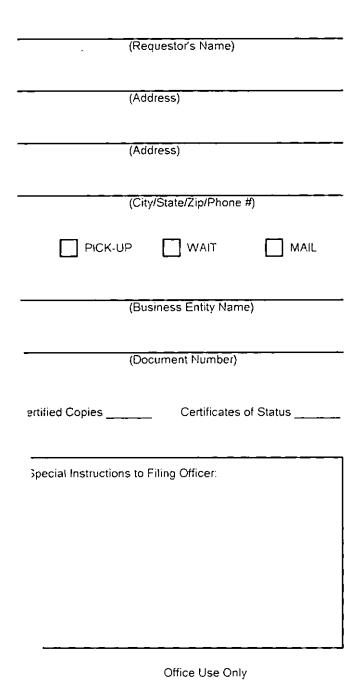
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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Kenneth	W. Detzner Consulting, LLC
The enclosed Articles of Organization and	fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Ke	nneth W. Petzver
	Name of Person
	· · · · · · · · · · · · · · · · · · ·
2901	- Whittington Dr Address
	Address
Tall	ahassee Horida 32309
Drpe	City/State and Zip Code tze Acc. wm
	be used for future annual report notification)
For further information concerning this matt	er, please call:
Ken Petzsc Name of Person	rat (<u> </u>
Enclosed is a check for the following amou	mt:
\$125.00 Filing Fee \$130.00 Filing Certificate of S	
Mailing Address New Filing Section	Street Address New Filing Section
Division of Corporation P.O. Box 6327	s Division of Corporations Clifton Building

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	

(Must contain the words "Limited Liability Company, "L.L.C." or "LCC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
2904 Whittington Dr.	SAME
Tallahanee, A. 72309	

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Name

2904 Whittington P.r

Florida street address (P.O. Box NOT acceptable)

Tailaharsen Fq. 32309
City State Zip

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 Surther agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I im familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	authorized to manage and control the Limited Liability Company: Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Ken Peterser
Mgr.	Mary Kay Petzner 2904 Whitington Ar. Tallahames 4-(1, 32309
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the d (If an effective date is listed, the date must be the date of filing.)	ate of filing: specific and cannot be more than five business days prior to or 90 days after of meet the applicable statutory filing requirements, this date will not be listed as ent of State's records.
ARTICLE VI: Other provisions, if any,	
REQUIRED SIGNATURE:	la Deton
This document is ex- 1 am aware that any f	member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b). Florida Statutes. alse information submitted in a document to the Department of State gree felony as provided for in s.817.155. F.S. Wen Detaler
 ,	Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)