

19000002351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

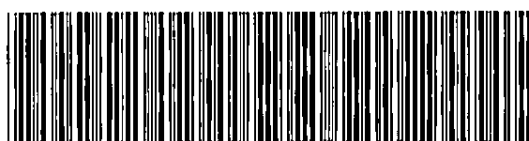
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200321971372

01/04/19--01005--00

FILED
2019 JAN -4 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REC'D
2019 JAN -4 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Madison Street Strategies, LLC
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:

Jack E. Kiker, III, Esq.
Name of Person
Williams, Gautier, Gwynn, DeLoach & Kiker, P.A.
Firm/Company
2010 Delta Blvd.
Address
Tallahassee, FL 32303
City/State and Zip Code
erinpaigegillespie@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jack E. Kiker, III, Esq. at (850) 386-3300
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION OF
Madison Street Strategies, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company (hereinafter referred to as the "Company") is:

"Madison Street Strategies, LLC"

ARTICLE II — Addresses:

The initial mailing address of the Company is follows:

4834 Limoges Drive
Tallahassee, Florida 32308

The initial street address of the principal office of the Company is as follows:

4834 Limoges Drive
Tallahassee, Florida 32308

ARTICLE III — Management:

The Company is to be managed by a Manager and is, therefore, a Manager-managed company. The initial Manager shall be Erin Gillespie.

ARTICLE IV — Registered Agent:

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

Jack E. Kiker, III, Esq.
Williams, Gautier, Gwynn, DeLoach & Kiker, P.A.
2010 Delta Blvd.
Tallahassee, Florida 32303

FILED
2019 JAN -6 PM 1:09
TALLAHASSEE, FLORIDA

Filing Fee: \$100.00 for Articles of Organization
 \$25.00 for Designation of Registered Agent

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, *Florida Statutes*.



Jack E. Kiker, III

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of the Company and its Manager, and acknowledge them to be my act this 4th day of January, 2019. In accordance with Section 605.0203(1)(b), *Florida Statutes*, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 817.115, *Florida Statutes*.



Jack E. Kiker, III

FILED
2019 JAN -4 PM 1:09
OFFICE OF THE
CLERK OF THE
STATE OF FLORIDA
TALLAHASSEE, FLORIDA