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COVER LETTER

	egistration Section ivision of Corporations	
SUBJECT	MCS CONSULTING AND DESIGN, LLC	
3000001	Name of Limited Liability Company	
The enclos	ed Articles of Organization and fee(s) are submitted for filing.	
Please retu	rn all correspondence concerning this matter to the following:	
	ANN BLACK	
	Name of Person	
	SMITH, THOMPSON, SHAW, MINACCI, COLON & POWER, P.A.	
	Firm/Company	
	3520 THOMASVILLE ROAD, FOURTH FLOOR	
	Address	
	TALLAHASSEE, FL 32309	
	City/State and Zip Code Marlee@mcs-cd.com	
•	E-mail address: (to be used for future annual report notification)	
For further in	nformation concerning this matter, please call:	
	ANN BLACK 850 893-4105 at ()	
	Name of Person Area Code Daytime Telephone Number	
Enclosed is	a check for the following amount:	
\$125.00 Fi	ling Fee \$\frac{\text{\$130.00 Filing Fee & Certificate of Status}}{\text{Certified Copy}} \tag{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy} \text{(additional copy is enclosed)}	
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION OF MCS CONSULTING AND DESIGN, LLC

The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes (the "Florida Revised Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

NAME.

The name of the Limited Liability Company is **MCS CONSULTING AND DESIGN**, **LLC** (hereinafter referred to as the "Company").

2. **PERIOD OF DURATION**.

The period of duration of the Company shall be perpetual, unless it is dissolved as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

PURPOSE.

To engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. MAILING ADDRESS OF BUSINESS.

The mailing address of the business in Florida for the Company is 1394 Pawnee Pointe Court, Tallahassee, Florida 32312. Such address may be changed from time to time as provided in the Operating Agreement.

5. <u>ADDRESS OF PLACE OF BUSINESS.</u>

The address of the place of business is 1394 Pawnee Pointe Court, Tallahassee, Florida 32312. Such address may be changed from time to time as provided in the Operating Agreement.

6. **REGISTERED AGENT.**

The initial registered agent in Florida for the Company is: FRANK S. SHAW, III, 3520 Thomasville Road, 4th Floor, Tallahassee, Florida 32309.

7. **MANAGEMENT**.

The name and address of the person authorized to manage and control the Limited Liability Company are as follows:

EXECUTED at Tallahassee, Leon County, Florida this 25 day of June, 2019.

MARLEE C. SHAW

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT WITH WHOM PROCESS MAY BE SERVED.

Pursuant to the provisions of Section 605 Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the limited liability company is MCS CONSULTING AND DESIGN, LLC.
- 2. The name of the registered agent and office is: FRANK S. SHAW, III, 3520 Thomasville Road, 4th Floor, Tallahassee, Florida 32305.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to being available at said location.

FRANK/S. SHAW. III