Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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

Email Address:

FLORIDA LIMITED LIABILITY CO. MONROE DOUGLAS EMPLOYEE BENEFITS CONSULTING GROUP, L

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION OF MONROE DOUGLAS EMPLOYEE BENEFITS CONSULTING GROUP, LLC

ARTICLE I: - Name

The name of the Limited Liability Company is: MONROE DOUGLAS EMPLOYEE BENEFITS CONSULTING GROUP, LLC.

ARTICLE II: - Address

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

347 Plymouth Road West Palm Beach, Florida 33405

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

Douglas Pridgen 347 Plymouth Road West Palm Beach, Florida 33405

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.

Douglas Pridgen, Registered Agent

60108034;1

ARTICLE IV: - Management

The name and address of each individual authorized to manage and control the limited liability company is as follows:

Title:

Name and Address:

MGR

Douglas Pridgen
347 Plymouth Road

West Palm Beach, Florida 33405

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization

on September 24_, 2021.

Douglas Pridgen, Authorized Signer

(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 817.155, Florida Statutes.)

Douglas Pridgen

Typed or printed name of signee