

L22000058455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

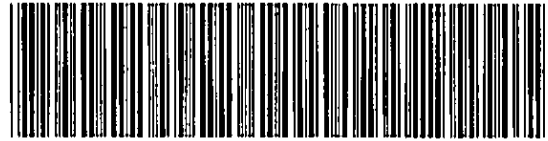
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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U.S. DEPARTMENT OF COMMERCE

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22 JAN 27 AM 9:48

FEB 14 2002

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Balancing Accounts 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:

Jeani Bazan

Name of Person

Balancing Accounts LLC

Firm/Company

3520 Sandalwood Circle, Suite #2314

Address

Naples, Florida 34019

City/State and Zip Code

balancingact@mindspring.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeani Bazan

404

606-3634

at ()

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

22 JAN 27 AM 9:48

The name of the Limited Liability Company is:

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

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

Mailing Address:

3520 Sandalwood Circle, Suite 2314
Naples, FL 34109

(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:

Opi Consulting Corporation
Name

300 Beach Drive, Suite #301

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

St Petersburg	Florida	33701
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 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..

Opi Consulting

By:

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Jeani Bazan

3520 Sandalwood Circle, Suite #2314

Naples, FL 34019

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: February 1, 2022 (OPTIONAL)

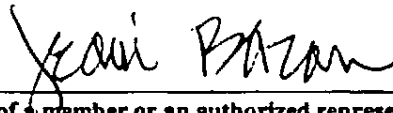
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

The purpose of the company shall be: Providing Accounting Services & Solutions to Small Business & Entrepreneurs

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

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 s.817.155, F.S.

Jeani Bazan

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)

\$ 5.00 Certificate of Status (Optional)