## 12200093/32

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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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3/1/22



## **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: CONDER Consulting Group, LLC Name of Limited Liability Company
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:
Conrad Whitaker Name of Person
CONDER Consulting Group, LAC
3616 Heron Point CT.
Address
ESTERO, FL. 34134  City/State and Zip Code
Swhit 69279@ aol. Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Convad Whitaker at (859) 227-2596  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  Tallahassee, FL 32314  Street Address  New Filing Section Division  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810  Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTI	CLE	-	lame:	

The name of the Limited Liability Company is:

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

## ARTICLE II - Address:

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

Principal Office Address:	Maining Address:
3616 Heron Point CT.	3616 Heron PoinT CT.
ESTEVO. FL.	Estero. FL.
34134	34134
	:

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:

Conrad Whitaker

Name

3616 Heron Point CT.

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

ESTero FL. 34134

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...

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

<u>Title:</u> "AMBR" = Author	Name and Address: rized Member	
"MGR" = Manager	r	
	Conrad WhiTaker	
	3616 Heron Point CT.	
	ESTERO, FL. 34/34	<del>.</del>
	Derek Vaughan	
	3616 HEVER POINT CT.	
	ESTERO, FL 34134	
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