

L23000019734

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000020933 3)))



H23000020933ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE
Account Number : I20070000019
Phone : (518)689-1212
Fax Number : (518)432-0742

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

110 AM 9:55

FILED

****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.

AndreaLondon Consulting Group, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

2023 01 10 10:03

T. BURCH
JAN 19 2023

Articles of Organization
for
Florida Limited Liability Company

FILED
JAN 18 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the Limited Liability Company is: **AndreaLondon Consulting Group, LLC**

ARTICLE II ADDRESS

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

Principal Office Address: **215 33rd ST, WEST PALM BEACH, FL 33407**

Mailing Address: **413 36th ST, WEST PALM BEACH, FL 33407**

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

ANDREA LONDON, 215 33rd ST, WEST PALM BEACH, FL 33407

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..

/s/ ANDREA LONDON

Registered Agent's Signature

(CONTINUED)

ARTICLE IV AUTHORIZED REPRESENTATIVE / MANAGER

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

ANDREA LONDON, Authorized Member, 215 33rd ST, WEST PALM BEACH, FL 33407

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.

/s/ ANDREA LONDON

Authorized Member

FILED
JAN 18 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA