

L24000039528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900421349589

01/24/24--01001--003 **125.00

RECEIVED
2024 JAN 23 PM 4:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024

13

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: MCCLENNY FINANCIAL GROUP, 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:

James M. McClenny

Name of Person

Firm/Company

1292 Timberlane Road

Address

Tallahassee, FL 32312

City/State and Zip Code

jmccleddy@trekfinancial.com

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

For further information concerning this matter, please call:

James McClenny

850

900.5200

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

**ARTICLES OF ORGANIZATION
OF
MCCLENNY FINANCIAL GROUP, LLC**

ARTICLE I – NAME

The name of the limited liability company is McClenny Financial Group, LLC, ("company").

ARTICLE II – ADDRESS

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

Principal Office Address:
1292 Timberlane Road
Tallahassee, Florida 32312

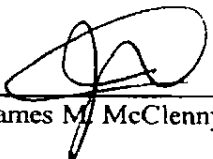
Mailing Address:
1292 Timberlane Road
Tallahassee, Florida 32312

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

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

James M. McClenny
1292 Timberlane Road
Tallahassee, Florida 32312

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.



James M. McClenny

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

Name and Address:

"MGR" = Manager
"AMBR" = Authorized Member

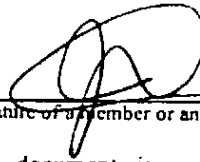
AMBR

James M. McClenny
1292 Timberlane Road
Tallahassee, FL 32312

AMBR

Carolyn S. McClenny
1292 Timberlane Road
Tallahassee, FL 32312

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.

James M. McClenny

Typed or printed name of signer

2024

115.2