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моетт к	INGDOM LLC			•	73	
	Name of	Limited Liabil	ity Company		99 5	<u>.</u>
					عُد. سد	
l Articles of	Organization and fee(s)	are submitted	for filing.		~. ;2	
all correspo	ondence concerning this	matter to the	following:		ഗ	
DAVID MO	ETT					
		Name of	Person			
MOETT KII	NGDOM LLC					
		Firm/Co	mpany			
21800 SW 1	11 AVENUE					
		Addr	ress			
MIAMI, FLO	ORIDA 33170					
		City/State an	d Zip Code	······································		
AREMOET	T29@GMAIL.COM					
i	E-mail address: (to be us	sed for future a	nnual report notificat	ion)		
ormation co	ncerning this matter, ple	ase call:				
AVID MOI		786	658-3686			
Nam		Area Code	Daytime Telephon	e Number		
check for t	he following amount:					
iling Fee	□\$130.00 Filing Fee Certificate of Status	Certifi	ed Copy	■\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclose	ed)	
<u>Mailin</u>	ıg Address		Street Address			
			New Filing Section Division			
PIL	P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303		ei, buile bio			
	MOETT K I Articles of all corresponding the corresponding to the corres	Articles of Organization and fee(s) all correspondence concerning this DAVID MOETT MOETT KINGDOM LLC 21800 SW 111 AVENUE MIAMI, FLORIDA 33170 AREMOETT29@GMAIL.COM E-mail address: (to be used formation concerning this matter, please of Person A check for the following amount: Ciling Fee	MOETT KINGDOM LLC Name of Limited Liabil I Articles of Organization and fee(s) are submitted at all correspondence concerning this matter to the following amount: Name of MOETT Simple Simp	MOETT KINGDOM LLC Name of Limited Liability Company J Articles of Organization and fee(s) are submitted for filing. all correspondence concerning this matter to the following: DAVID MOETT Name of Person MOETT KINGDOM LLC Firm/Company 21800 SW 111 AVENUE Address MIAMI, FLORIDA 33170 City/State and Zip Code AREMOETT29@GMAIL.COM E-mail address: (to be used for future annual report notificate formation concerning this matter, please call: DAVID MOETT 786 OS8-3686 Name of Person Area Code Daytime Telephon The Certificate of Status New Filing Fee & Certified Copy (additional copy is enclosed) Malling Address New Filing Section Division of Corporations The Centre of Tallahar New Filing Section Division of Corporations	MOETT KINGDOM LLC Name of Limited Liability Company Darticles of Organization and fee(s) are submitted for filing. Particles of Organization and fee(s) are submitted for filing. Particles of Organization and fee(s) are submitted for filing. Particles of Organization and fee(s) are submitted for filing. Particles of Organization and fee(s) are submitted for filing. Particles of Organization and fee(s) are submitted for filing. Particles of Person MOETT KINGDOM LLC Firm/Company Address MIAMI, FLORIDA 33170 City/State and Zip Code AREMOETT29@GMAIL COM E-mail address: (to be used for future annual report notification) Particles of Status and Zip Code Area Code Daytime Telephone Number Particles of Status and Certified Copy (additional copy is enclosed) Malling Fee	ision of Corporations MOETT KINGDOM LLC Name of Limited Liability Company If Articles of Organization and fee(s) are submitted for filing. Particles of Organization and fee(s) are submit

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability	y Company is:				
MOETT KINGDOM	LLC				
(Must conta	in the words "Limited	Liability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street ad	draws of the principal c	office of the Limited	Liability Company is:		
the flatfing address and sireet ad	diess of the principal (office of the Entitle	Clautinty Company is.		
Principal Office Address:			Mailing Address:		
21800 SW 111 AVENUE		2180	21800 SW 111 AVENUE		
MIAMI, FLORIDA		MIA	MIAMI, FLORIDA		
33170		3317	33170		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own	Registered Agent. '	nt's Signature: You must designate an individual or		
	ctive i tottua registratit	on.)			
The name and the Florida street a	_				
The name and the Florida street a	_				
The name and the Florida street a	ddress of the registered				
The name and the Florida street a	ddress of the registered	d agent are: Name			
The name and the Florida street a	ddress of the registered	d agent are: Name	eceptable)		
The name and the Florida street a	DAVID MOETT 21800 SW 111 AVE	d agent are: Name	eceptable) 33170		

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:

Title: "AMBR" = Authorized Me	Name and Address:
"MGR" = Manager	moor
MGR	DAVID CHARLES MOETT SR.
111011	21800 SW 111 AVENUE
	MIAMI, FL 33170
MGR	SHARONDA NICOLE JACKSON
	21800 SW 111 AVENUE
	MIAMI. FL 33170
 -	
(Use attachment if necessar	ry)
	r than the date of filing: (OPTIONAL) te 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 blo the document's effective date on the	ock does not meet the applicable statutory filing requirements, this date will not be listed as a Department of State's records.
ARTICLE VI: Other provisions, if a	
• • • • • • • • • • • • • • • • • • •	
REQUIRED SIGNATUR	E:
	50 Wiett
	ature of a member or an authorized representative of a member.
	nent is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	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.
<u>DA'</u>	VID CHARLES MOETT SR.
	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)