## L21000469446

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(Address)	
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

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

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
808 WASHINGTON JOKET	······································
JEFFEREN CITY MAD 65109	DEALERSON CINERO 65703
JUN 1010 011 111 65109 -	

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:

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

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)

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ARTICLE IV.	
ine name and address of each person aut	thorized to manage and control the Limited Liability Company:
Title:	and its its indicated the control of the Limited Liability Company
"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MABR	SKEFERSON CON MAD 65108
	, <del>, , , , , , , , , , , , , , , , , , </del>
·	
(Use attachment if necessary)	
in necessary)	
ARTICLE V: Effective date, if other than the date of fit (If an effective date is listed, the date must be specific the date of filing.)  Note: If the date inserted in this block does not meet the document's effective date on the Department of Ste	ling: (OPTIONAL)  and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	are a records.
Other provisions, if any.	<u>:</u>
	·
REQUIRED SIGNATURE:	
Signature of a member of This document is executed in a I am aware that any false inform constitutes a third degree felony	coordance with section 605.0203 (1) (b), Florida Statutes. as provided for in s.817.155, F.S.
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)
\$ 5.60 Certificate of Status (Optional)