## L1200012-8436

, · (Requestor's Name)
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EXAMINER

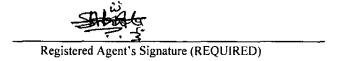
## COVER LETTER

TO: Registration Section Division of Corporations	, 	
SUBJECT: Simple Creative Inv	vestments LLC	
	Limited Liability Company	WE-1
The enclosed Articles of Organization and fee(		
Please return all correspondence concerning this	is matter to the following:	
Adesola Gbadamosi		
	Name of Person	<del></del>
Simple Creative Invest	ments LLC	
V.V.	Firm/Company	<del></del>
1790 Bavon Drive		_
	Address	<del></del>
Deltona FL 32725		7 2
	City/State and Zip Code	
solaservices@yahoo.com	used for future annual report notification)	<b>岩质 8</b>
		-8 M
For further information concerning this matter,	please call:	177 T.
Adesola Gbadamosi	at (386 ) 717-9437	STATE 33
Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amou	int:	
\$125.00 Filing Fee State  Certificate of State	us Certified Copy Certificate of (additional copy is enclosed) Certified Co	of Status &
Mailing Address Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	Clifton Building	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

. —	/	
ARTICLE I - Name: The name of the Limited Liability Comp	pany is:	
Simple Creative Investme  (Must end with the words "Limi	ents LLC ited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited Liability	y Company is:
Principal Office Address:	Mailing Address:	
1790 Bavon Drive Deltona FL 32725	P . O . Box 5431 Deltona FL 32728	<u> </u>
	ristered Office, & Registered Agent's Sign wn Registered Agent. You must designate an individual of	Another
The name and the Florida street address	of the registered agent are:	
Adesola Gbadan	nosi, President	<b>7</b> & <b>1</b>
,	Name	
1790 Bavon		<b>≥</b>
Florida s	street address (P.O. Box <u>NOT</u> acceptable)	m 🕁 :
Deltona	<sub>FL</sub> 32725	
	City, State, and Zip	

Having been named as registered agent and to accept service of process for the above stated limited in 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 608, F.S..



(CONTINUED)

Name and Addréss:	
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· · · · · · · · · · · · · · · · · · ·	
Adesola Gbadamosi	
Deltona FL 32725	
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	13*
date of filing:	(OPTION/
	date of filing:

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

constitutes an affirmation under the penalties of perjury that the facts stated herein are true 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.)

ADESOLA GBADAMOSI

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)