621000214532

(Re	questor's Name)	<u>,</u>
(Ad	dress)	-
(Ad	dress)	
168	ty/State/Zip/Phone	
(CII	ty/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Ĭ	
		<u>-</u>

Office Use Only



500363642355

04/09/21--01023--011 **125.00

121 7.3 -9 PA 12: 43

COVER LETTER

New Filing Section Division of Corporations

TO:

SUBJECT: Secrets 2 Scoring, 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:
ANORES BRANDY, CPA Name of Person
RALEY HIROH & ASSOC, LC
1006 W 25 " St
Address
Sanford, FL 3277/
Sanford FL 3277/ City/State and Zip Code h/hrrsch @ yehoo. co
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ANOREA BRANDY at (561) 734-145/ Name of Person Area Code Daytime Telephone Number
Name of Person / Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{Certificate of Status} \text{Certified Copy} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Secrets 2 Scoring LLC.
(Must contain the words "Limited Liability Company, "L.T.C.," or "LLC.")
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: 14158 PULIFIC POINT Place 1006 W 25 ST Delray Beach, FL 33484 59NFORD, FL 32771
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:
ANDREA BRAUDY, CAA
Florida street address (P.O. Box NOT acceptable) Name Florida street address (P.O. Box NOT acceptable) TR PKWY
SANFORD FL 3277/
City State Zip
daving 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 further agree to comply with the obligations of my position as registered agent as provided for in Chapter 605, F.S Registered Agent's Signature (REQUIREO)
(CONTINUED)
ا ر ،
·

Title: Authorized Member	Name and Address:			
"MGR" = Manager	Pull Wem			
	1001 111901			
	14/58 PACIFIC TOCHT I CO	JL /1		
	Delray Beach 3348	> T		
				
(Use attachment if necessary)				
the date of filing.)	of filing: (OPTIC recific and cannot be more than five business days proceed the applicable statutory filing requirements, this of State's records.			
ARTICLE VI: Other provisions, if any.				
				_
				_
REQUIRED SIGNATURE: V				
This document is execute	mber or an authorized representative of a member of a member of in accordance with section 605.0203 (1) (b), Flori	da Statui	tes.	
I am aware that any false	information submitted in a document to the Departm felony as provided for in s.817.155, F.S.	ent of St	laté 🗂	
Paul	Wilson		Ę,	
	Typed or printed name of signce	-	.0	• ;
	Filing Fees:		122	,
\$125.00 Filing Fee for Articles of Org	anization and Designation of Registered Agent	· <u>·</u>	12: 43	
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status-(Optional)	al)			

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

 $\mathcal{A}_{i}(x_{i}, x_{i}) = \mathcal{A}_{i}(x_{i}, x_{i})$

ARTICLE IV-