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TALLAHASSEE, FL

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Bright Little Futures Academy 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:

Heather Gammad + Jessica Hairston
~~Bright Little Future Academy LLC~~
Name of Person

Bright Little Future Academy LLC
Firm/Company

1401 S.W. M. L. K. Jr. ~~Blvd~~ St. Ste 1460
Address

Arcadia, FL. 34266
City/State and Zip Code

Littlebrightfuturesacademy@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Hairston at (863) 444-1193
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

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Bright Little Futures Academy 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

Jessica Hairston
Name of Person

Bright Little Futures Academy LLC
Firm/Company

140 S.W. M.L.K. Jr. street Ste. 1421
Address

Arcadia FL. 34266
City/State and Zip Code

Littlebrightfutures Academy@gmail.com
E-mail address: (to be used for future annual report notification)

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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:

Bright Little Futures Academy LLC
(Must contain the words "Limited Liability Company," "L.L.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:	Mailing Address:
1401 S.W. Martin Luther King Jr. St. ste. 1460 Arcadia, FL 34266	P.O. Box 2715 Arcadia, FL. 34265

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:

WTKE Resource Center
Name

1401 S.W. M.L.K. Jr. St. Ste 1421
Florida street address (P.O. Box NOT acceptable)

Arcadia, FL 34266
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..

Jennifer Daniels
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV-
The name and address of each person authorized to manage and control the Limited Liability Company.

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Heather Gammad 3186 SE Lovejoy St Arcadia FL 34266
MGR	Jessica Hairston 209 Providence St Arcadia, FL 34266

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed, the date 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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

ARTICLE VI: Other provisions, if any.
Heather Gammad 51% owner
Jessica Hairston 49% owner

REQUIRED SIGNATURE:
Jennifer Daniels

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.

Jennifer Daniels
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)

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