

L00600008711

H. Keith Mizell
160 Cypress Club Drive, 625
Pompano Beach, FL 33060

July 17, 2000

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: LLC Registration

400003328704--2
-07/19/00--01117--006
****130.00 ****130.00

To Whom It May Concern:

Pursuant to your instructions, please be advised that my address is listed above and that my daytime telephone number is 954-468-1525.

If you should need any additional information, please do not hesitate to call.

Regards,



H. Keith Mizell

Enclosures

FILED
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TALLAHASSEE, FL 32314

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7/24

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ARTICLE 1 - Name:
The name of the Limited Liability Company is:

H. KEITH MIZELL, LLC

ARTICLE II - Address:

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

160 CYPRESS CLUB DRIVE, SUITE 625
POMPANO BEACH, FL 33060

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

H. KEITH MIZELL
Name
160 CYPRESS CLUB DRIVE, 625
Florida street address (P.O. Box NOT acceptable)
DAMPAN BEACH, FL 33060
City, State, and 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 608, F.S.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

Article IV - Management (Check box if applicable.)
☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(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.)

Typed or printed name of signee

FILING FEES:

FILING FEES:
\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)