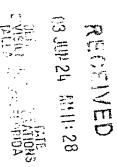
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nar	ne)
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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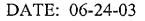






FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

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NAME: MERGION, LLC

TYPE OF FILING: ARTICLES

COST: \$125.00

RETURN:

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Mergion, LLC

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	資用 高
20423 State Road 7	20423 State Road 7	
F6 #275	F6 #275	
Boca Raton, FL 33498	Boca Raton, FL 33498	

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

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

Registered Agents	Legal Services, Inc.
	Name
1333 North Duval	Street
Florida street addre	ess (P.O. Box NOT acceptable)
Tallahassee	FL 32302
City	State and 7in

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..

> on butt of Zytol Sub legal serve, tre. Registered Agent's Signature

Michael W. Ashley, V.P.

(CONTINUED)

<u>Citle:</u> MGR" = Manager	Name and Address:
MGRM" = Managing Memi	per
	Laura Bryda
Use attachment if necessary)
	To second Long Ideal 10 cm of Constant Auto to consend a
OTE: An additional artic	cle must be added if an effective date is requested.
REQUIRED SIGNATURE	
Signature (In accorda of this docu	: Jama Bryda
Signature (In accorda of this docu	of a member or an authorized representative of a member. Ince with section 608.408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury ets stated herein are true.)
Signature (In accorda of this doct that the fact	of a member or an authorized representative of a member. Ince with section 608.408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury ets stated herein are true.)
REQUIRED SIGNATURE Signature (In accorda of this doct that the fac	of a member or an authorized representative of a member. Ince with section 608.408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury ets stated herein are true.) Typed or printed name of signee
REQUIRED SIGNATURE Signature (In accorda of this doct that the fac	of a member or an authorized representative of a member. Ince with section 608.408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury ets stated herein are true.)

Page 2 of 2

\$ 5.00 Certificate of Status (Optional)