## L040000/4/25

(Re	equestor's Name)	
(Ad	ldress)	
	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
Ви	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special instructions to	Filing Officer:	
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TALLAHASSEE, FLORIDA



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## TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

04 FEB 11 AM 8: 22

SUBJECT: Stewart LCC.

SECKETARY OF STATE TALLAHASSEE, FLORIDA

(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:			
Joshua f. Stewart			
(Name of Person)			
Stewart (L.C.			
(Firm/Company)			
PO Box 19531			
(Address)			
Panama City F.C. 32417			
(City/State and Zip Code)			

For further information concerning this matter, please call:

Joshva Stewalt at (78 Sol-1609

(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

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



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I - Name:	'ALLAHASSÉÉ, I
The name of the Limited Liability Company is:	
Stewart LLC.	
ARTICLE II - Address: The mailing address and street address of the princip	nal office of the Limited Liability Company is:
Principal Office Address:  Po Box 19531	Mailing Address:
Panama (ity, Fl. 32417	Same
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register School S	ered agent are:  (ewalt  ave. Apt 2B  NOT acceptable)  FLORIDA 32461
City, State, and Zip	V

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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

FILED

ARTICLE IV- Manager(s) or Man The name and address of each Mana	ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager	Name and Address:  SECRETARY OF STATE TALLAHASSEE, FLORIE
"MGRM" = Managing Member	Joshua F. Stewart
	forana City, F.L. 32417
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	A. D
•	in authorized representative of a member.
(In accordance with section of this document constitutes that the facts stated herein ar	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury etrue.)
Joshua	t Stowart

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)

Typed or printed name of signee