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(Re	questor's Name)	
(Ad	ldress)	<u></u>
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Ви	ı <b>s</b> iness Entit <b>y</b> Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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TRANSMITTAL LETTER	0 %
TO: Registration Section Division of Corporations	MAR OF FLORIDAY
SUBJECT: _ Curtis Enterprises, LLC	Troop to
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	TONS TONS
Please return all correspondence concerning this matter to the following:	
Attorney Michael J. Reiter (Name of Person)	<del></del>
(Firm/Company)	
2001 S. McCall Road, Suite C	
(Address)	
Englewood, FI. 34223	-
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Michael J. Reiter #1 ( 941 ) 475-9669	
(Name of Person) (Area Code & Daytime Telephone Number)	

STREET ADDRESS: Registration Section
Division of Corporations 409 E. Gaines Street Tailahassee, Florida 32399

**MAILING ADDRESS:** Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

On BOWN	
ON ALAIN SEE	M. O. To

The name of the Limited Liability Company is:	TO THE TOTAL PROPERTY OF THE PARTY OF THE PA
Curtis Enterprises, LLC	
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Company
Principal Office Address:	Mailing Address:
9881 Fagle Preserve Drive	9881 Eagle Preserve Drive
Englewood, FL 34224	Englewood, FL 34224
ARTICLE III - Registered Agent, Registered Offi The name and the Florida street address of the register	
Claudette E. Curtis	
Name	
9881 Eagle Preserve Driv	e
Florida street address (P.O. Box	
1.00.000 (2.00.200	NOT acceptable)

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)

	Ianaging Member(s): mager or Managing Member is as follows:  Name and Address:  Claudette E. Curtis 9881 Fagle Programs Prices	
	2	
	On the same	
ARTICLE IV- Manager(s) or N	[anaging Member(s):	
The name and address of each M	nager or Managing Member is as follows:	
Title:	Name and Address:	
"MGR" = Manager	The second secon	
"MGRM" = Managing Member	Office of the second se	
MGRM	Claudette E. Curtis	
	Joan ragie Freserve Drive	
	Englewood, FT, 34224	
·		
(Use attachment if necessary)		
	date shall be the date received by the	
Division of C	rporations.	
NOTE: An additional article r	ust be added if an effective date is requested.	
REQUIRED SIGNATURE:		
Da	$\mathcal{A}$	
Clauditte.	E. Curles	
_	or an authorized representative of a member.	
(In accordance with sec of this document consti that the facts stated her	tion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury in are true.)	
Claudette E.	•	

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