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JB
52704

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sweet Mango Management, 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:

Joseph Eaton
(Name of Person)

The Ark, Inc.
(Firm/Company)

155 Glendale Ave #14
(Address)

Sparks, NV 89431
(City/State and Zip Code)

For further information concerning this matter, please call:

Joey Eaton at (775) 331-0404
(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

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sweet Mango Management, LLC

ARTICLE II - Address:

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

Principal Office Address:

9031 SE Duncan St.

Hobe Sound, FL 33455

Mailing Address:

9031 SE Duncan St.

Hobe Sound, FL 33455

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

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

James Longo

Name

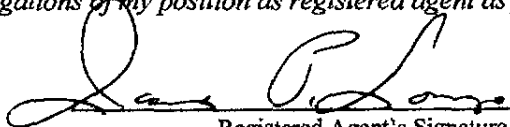
9031 SE Duncan St.

Florida street address (P.O. Box **NOT** acceptable)

Hobe Sound FL 33455

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

(CONTINUED)

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The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member

Hobe Sound, FL 33455

James Longo

REQUIRED SIGNATURE:


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.)

James Longo

Typed or printed name of signee

Filing Fees:

\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA