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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

[ ] PICK-UP [ ] WAIT [ ] MAIL

(Business Entity Name)

(Document Number)

Certified Copies ________ Certificates of Status ________

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: [illegible]
(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:

[illegible]
(Name of Person)

[illegible]
(Firm/Company)

[illegible]
(Address)

[illegible]
(City/State and Zip Code)

For further information concerning this matter, please call:

[illegible] at [illegible]
(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:
The name of the Limited Liability Company is:

[redacted]

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

Principal Office Address:

[redacted]

Mailing Address:

[redacted]

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

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

[redacted]
Name

[redacted]
Florida street address (P.O. Box NOT acceptable)

[redacted]
City, State and Zip

Having been named as registered agent 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.

[redacted]
Registered Agent's Signature

(CONTINUED)

ARTICLE V: Manager(s) or Managing Member(s)

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

Title:	**Name and Address:**
"MGR" = Manager "MGRM" = Managing Member	
[illegible]	[illegible] [illegible] [illegible]

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

[illegible]

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.)

[illegible]

Typed or printed name of signee

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)