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(Requ	estor's Name)			
(Addre	ess)			
(Addre	ess)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT ☐ MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Fili	ng Officer:			
3/25	FC (C)			

Office Use Only



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TRANSMITTAL LETTER

-=

TO: Registration Section Division of Corporations
SUBJECT: STUNTS & MORE, "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 C Hess (Name of Person)
Stunts & More,, "LLC"
661 M. Fig Tree LAne (Address)
Plantation, Fl 33317 (City/State and Zip Code)
For further information concerning this matter, please call: Brand A Mess at (754) 321-2327 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status \$130.00 Filing Fee Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)

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 1 - Name:

The name of the Limited Liability Company is:

STURTS & MORE.	100"LLC"		
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liab	oility Compa	ny is:
Principal Office Address:	Mailing Address:		
661 N. Fig Tree Lane Plantation, Florida 33317	SAME		
ARTICLE III - Registered Agent, Registered Agent, Registered and the Florida street address of t		Signature:	051
Joseph_N	C. Hess	*	25
Plantatio	t address (P.O. Box NOT acceptable) In FL 33317 Intake, and Zip		PM 1: 37

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)

ARTICLE IV- 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	
"MGR"	Joseph C Hess
ęt .	PLANTATION, FLA 33317
MGRM"	JOE BONACCI
	245 ALAMEDA VOUNKSTOWN, OHIO, 44505
"MGRM"	ROBB BUCKLAND
	Key west Pla 33040
" MGRM"	ERICK BREVER (BREVER)
	BONITA SPRINGS FLA 34136

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

On 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.)

(com 21/ 0 /

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)