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(Re	equestor's Name)	
(Ad	idress)	
(Ad	dress)	
(Ĉit	y/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		3/20/
	Office Use On	



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TRANSMITTAL LETTER

TO:

Registration Section

Divis	sion of Co	porations				
	0 0	on Intermedianal I.I.C				
SUBJECT: _	Casa Coo	o International LLC (Name of Limite	ed Liability Company)			,
The enclosed	Articles of	Organization and fee(s) are s	submitted for filing.			
Please return a	all correspo	ondence concerning this matt	er to the following:			
_	Daniel L	Clark, CPA				
		(Name of Person)			
Daniel I O	I. ODA					
Daniel L Cl	ark, CPA		(Firm/Company)			
			(a		Ed	233
						= 1
60	5 Belvede	re Rd. Suite 6	(Address)	<u> </u>		15-25 15-37
			(Address)		0: (-)	\Box
						1228 KHO: 53
	West	Palm Beach, FL 33405				<u> </u>
		(City	/State and Zip Code)			$\frac{5}{3}$
For further inf	ormation o	concerning this matter, please	call:			
Daniel L Clar	k, CPA		at (561) 820-92	19		
		of Person)	(Area Code & Daytin	e Telephone Nur	nber)	
Enclosed is a	check for	r the following amount:				
Z \$ 125.00 Fil	ling Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee Certified Copy (additional copy is enclosed)	Certifica Certified	00 Filing te of Statu d Copy copy is end	us &
	STRE	ET ADDRESS:	MAILING	G ADDRESS:		
		ration Section	Registratio			
		on of Corporations Gaines Street	P.O. Box	of Corporations 6327		
	Tallaha	assee, Florida 32399	Tallahasse	e, Florida 3231	4	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is	s:			
Casa Coco International LLC				
ARTICLE II - Address: The mailing address and street address of the particle o	principal office of the Limited L	iability Co	ompany	y is:
Principal Office Address:	Mailing Address:			
246 Lakeland Drive 246 Lakeland Drive				
West Palm Beach, FL 33405	West Palm Beach, FL 33405		_	
ARTICLE III - Registered Agent, Registere		s Signatu	re 200	ಎಕ್
The name and the Florida street address of the registered agent are:			(A)	\$ { 1 - 17 2 1,1
Arnfield Cudal		t	සි	
Nam	e	•		
246 Lakeland Drive		اداد میساید	Ö	West.
Florida street ac	ddress (P.O. Box NOT acceptable)	•	ω	
West Palm Beach, FL 33405	FL			
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..

egistered 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:

<u>Fitle:</u> 'MGR" = Manager	Name and Address:	
'MGRM" = Managing Member		
MGRM	Amfield Cudal	
	246 Lakeland Drive	
	West Palm Beach, FL 33405	
MGRM	Selah C Burson	
3323 Music Lane		
	Grand Junction, CO 81506	
MGRM	Richfield Cudal	
	312 Malverne Rd.	
	West Palm Beach, FL 33405	
Use attachment if necessary)		<u>ئ</u>
NOTE: An additional article must be	e added if an effective date is requested	23
REQUIRED SIGNATURE:	<u>.</u>	
Signature of a member	or an authorized representative of a member.	110:54
of this document constituent that the facts stated her Arn field	on 608.408(3), Florida Statutes, the execution ates an affirmation under the penalties of perjury rein are true.)	

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)