## W5000034982

(Requestor's Name)
(Address)
( (dailess)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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	TRANSMIT	TAL LETTER	
TO: Registration Se Division of Co			-
SUBJECT: Pure Pre		d Liability Company)	<u> </u>
	(Manie of Linne	d Liability Company)	
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Ashton F	lulscher		
<del> </del>	()	Name of Person)	
		Firm/Company)	
	(	Filtin Company)	
543 East Ri	dge Cir South		
		(Address)	
Daves	ton Donald El 00405		
Воуп	ton Beach, Fl, 33435	State and Zip Code)	
	(Chy)	State and Zip Code)	
For further information	concerning this matter, please	call:	
		TO 4000	
Ashton Hulscher	(B)	at (561 329 1986	
(Name	of Person)	(Area Code & Daytime To	elephone Number)
<b></b>			An B
Enclosed is a check to	or the following amount:		
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee &	\$155.00 Filing Fee &	Certificate of Status & Certified Copy
	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy (Cadditional copy is enclosed)
			T S

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

## A

ARTICLE I - Name: The name of the Limited Liability (	Company is:
Pure Pressure Services, LLC	
ARTICLE II - Address: The mailing address and street addr	ess of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
543 East Ridge Cir South	543 East Ridge Cir South
Boynton Beach, FI, 33435	Boynton Beach, Fl, 33435
ARTICLE III - Registered Agent	Registered Office, & Registered Agent's Signature:
The name and the Florida street add	, Registered Office, & Registered Agent's Signature:
	lress of the registered agent are:
The name and the Florida street add	lress of the registered agent are:
The name and the Florida street add  Ashton Hulscher  543 East Ridge C	lress of the registered agent are:
The name and the Florida street add  Ashton Hulscher  543 East Ridge C	Name  Cir South  Orida street address (P.O. Box NOT acceptable)

Ashton Hulscher

Registered Agent's Signature

Ashton FLST

Registered Agent's Signature

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: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
	N/A			
-				
				**
				·
-			-	÷
		<del></del>	•	
				. <u></u>
(Use attachment if necessary)  NOTE: An additional article must be	added if an effective date is requested			
REQUIRED SIGNATURE:	•			
Alfestota				
Signature of a member or	an authorized representative of a member.			*** **
(In accordance with section of this document constitute that the facts stated herei	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)			
Ashton Hulscher		750	2065	
Typed	or printed name of signee	CRE	APR	***********
Filing Fees:		TAR ASS	<i>₹</i>	250000 200000 1
\$125.00 Filing Fee for Articles of Organiza of Registered Agent	ation and Designation	10 A		- E
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)		NI STA		Mary