# . 050000 37019

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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# TRANSMITTAL LETTER

TO:	Registration Se Division of Co				
SUBJE	CT: Fixer LLC		-		
		(Name of Limite	d Liability Company)	<del></del>	·
The en	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.		
Please	return all corresp	ondence concerning this matte	er to the following:		
	Јау Нап	is			
			Name of Person)	<del></del>	
Fixer	LLC				
		(	Firm/Company)		
	14 Cambrid	ge Drive			
	<del></del>		(Address)	· · · · · · · · · · · · · · · · · · ·	
	Boyn	ton Beach Florida 33436			
		(City	State and Zip Code)		•
For furt	ther information	concerning this matter, please	call:		
JA	y HARR	ટાડ	561 757.	0912 -	
		of Person)	at (	elephone Number)	e A r Throne
			-	3	
Enclos	ed is a check fo	or the following amount:		$\frac{1}{\omega}$	: ====
<b>3</b> \$125	.00 Filing Fee	☐ \$130,00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee Certificate of Status & Certified Copy (additional copy is enclosed)	- 10 10 10 10 10 10 10 10 10 10 10 10 10
STREET ADDRESS:		MAILING A	DDRESS:		

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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	:		
Fixer LLC			
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
Fixer LLC	Fixer LLC		
14 Cambridge Drive	14 CAmbridge Drive		
Boynton Beach Florida 33436	Boynton Beach Florida 33436		
The name and the Florida street address of the Jay K. Harris			
Name	;		
14 CAmbridge Drive	14 CAmbridge Drive		
Florida street ad	dress (P.O. Box NOT acceptable)		
Boynton Beach Florida 33436	FL ST		
City, State,	and Zip		
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 308, F.S.		
	'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>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Ellen Harris MGRM	Ellen G. Harris
	14 Cambridge Drive
	Boynton Beach Florida 33436
Jay Harris MGR	Jay K. Harris
, , , , , , , , , , , , , , , , , , ,	14 Cambridge Drive
	Boynton Beach Florida 33436
(Tiga attachment if nacosany)	

(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.

(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.)

Jay K. Harris

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)