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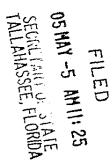
(Requestor's Name)	_		
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(City/State/Zip/Phone #)	_		
PICK-UP WAIT MAIL			
(Business Entity Name)	_		
(Document Number)			
Certified Copies Certificates of Status	_		
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T. Brumbley MAY 1 2 7005

TRANSMITTAL LETTER

TO: Registration Sec Division of Cor			
SUBJECT: Sean Smi		d Liability Company)	
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.	
Please return all correspo	ondence concerning this matte	er to the following:	
Sean C S		Name of Person)	
	(*	tanc or resony	
-	0	Firm/Company)	
	(i	· mm company)	
Rt 3 Box 254	4-3 B		
		(Address)	
Lake	Butler, FL 32054		SEC SEC
	(Cîty/	State and Zip Code)	AN F
For further information of	concerning this matter, please	call:	SECRLIAICI OF STATE TALLAHASSEE, FLORID) Telephone Number)
Sean C Smith		at (386) 623-2760	三二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二
(Name	of Person)	(Area Code & Daytime T	Celephone Number)
Enclosed is a check fo	r the following amount:		,
☐ \$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)
Registi Divisio 409 E.	ET ADDRESS: ration Section on of Corporations Gaines Street assee, Florida 32399	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, 1	Section Corporations

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Sean Smith Enterprises LLC		
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liabi	lity Company is:
Principal Office Address:	Mailing Address:	
RT 3 Box 254-3 5 Lake Butler, FL 32054	same	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re	-	gnature:
Name		
Lot 30 B Providence Village C	CR 245	
	ress (P.O. Box NOT acceptable)	
Lake Butler 32054	FL	
City, State, a	nd Zip	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered Agent's Registered Agent's	his certificate, I hereby accept the a v. I further agree to comply with th rformance of my duties, and I am fo attered agent as provided for in Cha	appointment as e provisions of all familiar with and epter 608, F.S ALLAH
(CONTIN		-5 ANII: 25 -5 ANII: 25 AKI GATE SSEE, FLORIDA

Page 1 of 2

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	
MGRM	Sean C Smith
•	RT 254-3D
	Lake Butler, FL 32054
and the second desire	
	•
<u> </u>	
(Use attachment if necessary)	
NOTE: An additional article mus	st be added if an effective date is requested.
RECHIRED 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.)

L. Smith
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)