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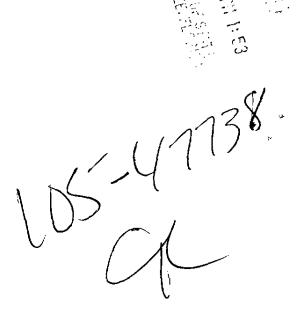
(Requestor's Name) (Address)			
			(Ac
(City/State/Zip/Phone #)			
PICK-UP	TIAW	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		

Office Use Only



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TRANSMITTAL LETTER

TO: Registration Se Division of Co			
SUBJECT: Political	Elements LLC		
	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Dorothy	L. Townsend		
	0	Name of Person)	
Political Elements 1	LC		
	(Firm/Company)	
6837 SW 3	9th Drive		
		(Address)	
Mirar	mar, Florida 33023		
(City/State and Zip Code)			
For further information	concerning this matter, please	call:	-
Kenneth A. Diggs		at (954) 914-5686	
(Name	e of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for	or the following amount:		-
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is onclosed)
OTHE	PET ABBRECO.	34 4 11 13/7 41	DDDECC.

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 I - Name: The name of the Limited Liability Company is: Political Elements LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:						
					Principal Office Address:	Mailing Address:
					6837 SW 39th Drive	6837 SW 39th Drive
Miramar, Florida 33023	Miramar, Florida 33023					
The name and the Florida street address of the re	egistered agent are:					
Name						
6837 SW 39th Drive						
Florida street address (P.O. Box NOT acceptable)						
Miramar, Florida 33023	<u>FL</u>					
City, State, and Zip						
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	ccept service of process for the above stated limited as certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S					

(CONTINUED)

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u> Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Kenneth A. Diggs
	6837 SW 39th Drive
	Miramar, Florida 33023
MGRM	Darothy L. Townsend
	6837 SW 39th Drive
	Miramar, Florida 33023
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE: Signature of a member of	r an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)
Kenneth Diggs	
Typeo	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)