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(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

TO: Registration S Division of Co							
SUBJECT:	11 Coo	per LLC					
	(Name of Limit	ed Liability Cor	mpany)				
The enclosed Articles of	of Organization and fee(s) are	submitted for fi	ling.				
Please return all corresp	pondence concerning this matt	ter to the follow	ing:				
	K. K. Bradley				_		
		(Name of Person)	· 		_		
	11 Cooper LLC						
		(Firm/Company)					
	PO Box 571			17.4 17.4	d. .	0	
		(Address)			FEC SEC	55	
					AL.	E	6:350
	Flagler Beach, FL 32	136			ŠŠĄ	22	€ <u>: 1=#</u> 44 45
 		/State and Zip Co	ode)		<u>in</u> =	PH 3: 27	gs=
					F10	بي	in.
For further information	concerning this matter, please	call:			REALE	22	
K. K. E	Bradley	at (_386) 439-2073) <u>.</u>			
(Name	of Person)	(Area C	ode & Daytime Te	elephone Num	ber)		
Enclosed is a check for	or the following amount:						
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Co	Filing Fee & opy oy is enclosed)	☐ \$160.0 Certificate Certified (additional o	of Statu Copy	s &	
	ET ADDRESS: tration Section		MAILING AI				
Divisi	on of Corporations . Gaines Street		Division of Co P.O. Box 6327	orporations			

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	11 Cooper	LLC	
ARTICLE II - Address: The mailing address and s		principal office of the Limited Liability Compa	ıny
Principal Office Address	<u>s:</u>	Mailing Address:	
209 N. Daytona Ave		PO Box 571	
Flagler Beach, FL 32136		Flagler Beach, FL 32136	
The name and the Florida	street address of the K. K. Br	e registered agent are:	•
The name and the Florida	K. K. Br	adley LAHASSE	4 2
The name and the Florida	K. K. Br Nan 209 N. E	Daytona Ave,	جو ج
The name and the Florida	K. K. Br Nan 209 N. E Florida street a	Daytona Ave, address (P.O. Box NOT acceptable) 222 Record 222	स्ट स १
The name and the Florida	K. K. Br Nan 209 N. E	Daytona Ave, address (P.O. Box NOT acceptable) FL 32136 PM 22 AHASS PM 3: 22	44 5 1

(CONTINUED)

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 **Dusty Palm Limited LLC** MGRM PO BOX 571 Flagler Beach, Fl 32136 (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.) Anderson Parker 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)