## 050000 82603

/Pa	questor's Name)	
ж	questors Marrie)	
(Ad	dress)	
(Ad	dress)	
(, ,,,,	arcss)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	sin <b>ess</b> Entity Nam	e)
(Do	cument Number)	
<b>,</b>	,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		alad.
		Noble
	Office Use Only	, ( XXXXX



800058627868

08/19/05--01023--005 \*\*155.00

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Fl. 32314

To Whom It May Concern:

ahren allen

In this envelope I am seeking to file the articles of organization for a Florida limited liability company. I have filled out Articles I – IV. In addition, I have submitted a check for \$155.00 for filing fees and a certified copy. Finally, if there are any questions concerning the information presented, please contact me at 954-798-3255.

Thank you,

Dahren Allen

05 AUG 19 AM 11: UZ

## FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Com	pany is:
Sharing Plans L	LC
ARTICLE II - Address:	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Sharing Plans LLC	Sharing Plans LLC
7907 SW 7th Place	North Landerdale, FL 33068

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

**ARTICLE I - Name:** 

Name

7807 SW 7th Place
Florida street address (P.O. Box NOT acceptable)

North Lauderdale, FL 33068
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

ARTICLE	IV-	Manager(	s) 01	· 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:		
MGRM	Dahren Allen 7807 SW 7th Place North Landerdale, FI. 33068		
MGRM	Danladi Allen 102 South Santa Circle North Lauderdale (Fl. 33068		
(Use attachment if necessary)	95 AUG 19 FILE AHAVIOR AND		
NOTE: An additional article must be a REQUIRED SIGNATURE:	added if an effective date is requested. SIAII . 02		
Dahren	allen		
_	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.)			
Dahr	cen Allen or printed name of signee		

## Filing Fees:

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)