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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

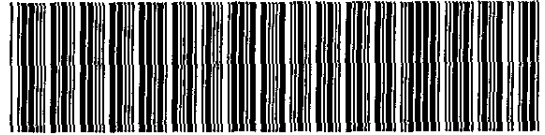
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05 AUG 24 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05 AUG 24 PM 2:41
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mo For You, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Keen
(Name of Person)

Mo For You, LLC
(Firm/Company)

8534 Charrington Forest Blvd
(Address)

Tallahassee FL 32312
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Keen at (850) 528-0604
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for 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)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
MO FOR YOU, LLC**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes (the “Florida Limited Liability Company Act”), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

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TALLAHASSEE, FLORIDA

1. NAME

The name of the Limited Liability Company is MO FOR YOU, LLC (hereinafter referred to as the “Company”).

2. PERIOD OF DURATION

The period of duration of the Company shall be from the date of filing of its Articles of Organization until the first to occur of the following:

- (i) Dissolution of the Company pursuant to the provisions of the Florida Limited Liability Act; or
- (ii) By the mutual written agreement of a majority in capital interest of the Members.

3. PURPOSE

The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. **ADDRESS OF PLACE OF BUSINESS**

The mailing address and the street address of the place of business for the Company is 8534 Charrington Forest Blvd, Tallahassee, FL, 32312. Such address may be changed from time to time as provided in the Operating Agreement.

5. **REGISTERED AGENT**

The initial registered agent in Florida for the Company is MICHAEL KEEN, and the initial registered office is located at 8534 Charrington Forest Blvd, Tallahassee, FL, 32312.

6. **MEMBERS**

The Company shall have at least one (1) Member, and may admit additional members upon the prior unanimous written agreement of the then existing Members, or as otherwise provided in the Operating Agreement.

7. **CONTINUITY OF BUSINESS**

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or the occurrence of any other event which terminates the continued membership of a Member in the Company, the business of the Company shall be continued and the Company shall not be dissolved without the prior written consent of all the remaining Members (if any) of the Company.

8. **MANAGEMENT**

The management of the Company shall be reserved to its Members. The Members may, from time to time, elect a manager in the manner provided in any written operating agreement.

among all of the Members. Any such Manager shall have the powers and authority expressly granted under the Operating Agreement.

9. INDEMNIFICATION

Except as expressly provided otherwise in the Operating Agreement, the Company shall indemnify any Member or former Member to the full extent permitted under the Florida Limited Liability Company Act.

Executed at Tallahassee, Florida, in the 22nd day of August, 2005.

MO FOR YOU, LLC,
a Florida limited liability company

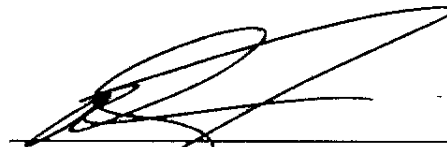
By: _____

MICHAEL KEEN

ACCEPTANCE BY REGISTERED AGENT

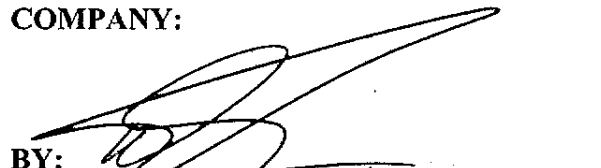
Having been appointed the registered agent of MO FOR YOU, LLC, the undersigned accepts such an appointment, agrees to act in such capacity and accepts the obligations proposed by Florida Statutes Section 608.415 and is herewith simultaneously designated as registered agent by MO FOR YOU, LLC.

Executed this 22nd day of August, 2005.



**Michael Keen,
REGISTERED AGENT**

**FOR THE LIMITED LIABILITY
COMPANY:**


BY: _____
Michael Keen, MEMBER