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(Re	equestor's Name)	
(Address)		
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(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Registration So Division of Co		•	
SUBJECT: Q	3K5 Florid	d Liability Company)	·
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
_	ondence concerning this matte		
Kathr	yn A. Bres	Name of Person)	
(Firm/Company) 65 (Nescent Exec. Ct. Suite 120 (Address)			
	UNSCEN Z	(Address)	110 100
(City/State and Zip Code) For further information concerning this matter, please call:			
Katie		at (40h) 333 (Area Code & Daytime Te	3233 Ext. 23
	or the following amount: \$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)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
615 Crescent Exec. Ct. Ste 120 (615 Crescent Exec. Ct. Suite 120 Lake Mary, FL 32746.
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Saint-Laurent Properties, LLC.
1790 Legian Drive Florida street address (P.O. Box NOT acceptable)
Winter Park FL 32789
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

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managin The name and address of each Manager of	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
_msr	2105 cluster Branch Ct. Longwood, R. 32779
MgR_	Brockey Saint-Laurent 1790 Utgjan Drive Winter Pork, FC 32789.
mgR	Kathryn A. Breslaw 201 Strafford Unive Winter Springs, 12 32700
MgR	Stacy Banach 294 Live Oak Blvd. Sanford Pl 32713
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	ecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member.
of this document constitutes that the facts stated herein	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.) A. Breslaw r 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)