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PICK-UP WAIT	MAIL	-			
(Business Entity Name)			01/20/06	01042013	**155.00
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Certified Copies Certificates of	Status				
Special Instructions to Filing Officer:					
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Office Use Only

COVER LETTER Registration Section TO: Division of Corporations (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: Name of Person) (Firm/Company) For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ☑ \$155.00 Filing Fee & ☐ \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314 Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: 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: Florida street address (P.O. Box NOT acceptable) 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY: CQ

ARTICLE I - Name:

· , - : ' '	ARTICLE IV- Manager(s) or Man The name and address of each Manager	FILED		
	Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	2016 JAN 20 P 2: 33	
	MGRM	Jalynn Ming 3389 N. Kudrose. Beverly Hills, FL	Path SULVES	
- - 				
	 			
(If ar	(Use attachment if necessary) ICLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.)		(OPTIONAL) e business days prior	
	REQUIRED SIGNATURE:	er or an authorized representative of a memi	ber.	
^_ ^ . —	In accordance with se of this document const that the facts stated in the facts stated	ection 698.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perj	m	
· .	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)