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(R	equestor's Name)	
(A	ddress)	
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(C	city/State/Zip/Phone	9 #)
PICK-UP	WAIT	MAIL
(В	Business Entity Nar	ne)
<u>(C</u>	Ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	o Filing Officer:	
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Office Use Only



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OG MAY 18 AM ID: ON SECRETARY OF STATE FALLAMASSEE, FLORE



COVER LETTER

TO: Registration Se Division of Co				
SUBJECT: Fifty	1-One Business (Name of Limite	Juvestor S d Liability Company)		,
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following:		
Fre	edrick B. V	055	· .	
	(1	Name of Person)	•	
F;F\	Y-One Busines	K Invectors Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
37.	52 Forsythe h	/ay_	SEC	06 (
		(Address)	AH	D
Tall	ahassee, FL (City	3>309	ARY ASSE	18
	City	/State and Zip Code)	<u> </u>	3
For further information	concerning this matter, please	call:	STATE LORIDA	AM 10: 08
Fredrict B (Name	of Person)	at (& S O) S S 6 (Area Code & Daytime T	-6709 (elephone Number)	
•				
Enclosed is a check fo	or 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 Certificate of Stat Certified Copy (additional copy is en	us &
	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	ons	

Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Fity-Une Business Investor SILL
(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:
3752 Forsythe Way Tallahassee, FL 32309 Tallahassee, FL 32309
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: Fredrick B. Ross Name 3752 Forsythe Way Florida street address (P.O. Box NOT acceptable) Tallahassee, FL 32309 City, State, and Zip
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 a 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

Title: "MGR" = Mana "MGRM" = Ma	ager anaging Member	Name and Address:	
MGR		Fredrick Ross 3752 Forsythe Wax	
		Tallahassee, FL 3230	99
			SE PALL
		·	MAY I
			8 AMI
			STALE LORIDA
(Use attachmen	it if necessary)		-
	e date, if other than th	e date of filing:	(OPTIONA
CLE V: Effective	isted, the date must	be specific and cannot be more than fi	
CLE V: Effective effective date is lided days after the o	isted, the date must l	be specific and cannot be more than fi	
ffective date is li	isted, the date must date of filing.)	be specific and cannot be more than f	,
ffective date is li days after the o	isted, the date must date of filing.)		
effective date is li I days after the o	isted, the date must date of filing.) SIGNATURE: Signature of a memb	per or an authorized representative of a mel	mber.
effective date is li I days after the o	Signature of a member of this document contract that the facts stated	per or an authorized representative of a medication 608.408(3), Florida Statutes, the executivitutes an affirmation under the penalties of polyherein are true.)	mber. tion

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)