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(Re	equestor's Name)	· · · · · · · · ·
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SECRETARY OF STATE OIVISION OF CORPORATIONS

COVER LETTER

Division of Cor			
SURJECT. Affordal	ble Redesign 2 Sell, I	.LC	
		Liability Company)	·
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.	
Please return all correspo	ondence concerning this matte	r to the following:	
Jessica We			
	0	Name of Person)	
Affordable l	Redesign 2 Sell, LL(
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Firm/Company)	
1801 Enter	rprise Avenue		
		(Address)	
Saint Augu	ıstine, Fl 32092		
-	(City	/State and Zip Code)	
For further information of	concerning this matter, please	call:	
Jessica Weaver		at (904) 940-667	0
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check fo	r 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)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporatio 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:
Affordable Redesign 2 Sell, LLC	
(Must end with the words "Limited Liability Company, "Li	mited 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:
1801 Enterprise Avenue	1801 Enterprise Avenue
Saint Augustine, FI 32092	Saint Augustine, Fl 32092
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The name and the Florida street address of th	e registered agent are:
Jessica Weave	·
Nau	me
1801 Enterprise Avenue	
Florida street	address (P.O. Box NOT acceptable)
Saint Augustine, FI 32092	FL
City, Stat	te, 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 (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Memb	per
MGRM	Jessica Weaver
	1801 Enterprise Avenue
	Saint Augustine, Fl 32092
MGRM	Kelli Diaz
	832 Hibernia Forrest Drive
	Green Cove Springs, Fl 32043
MGRM	James Weaver
W.C. III	1801 Enterprise Avenue
	Saint Augustine, Fl 32092
(Use attachment if necessary)	
	than the date of filing: (OPTIONAL) must be specific and cannot be more than five business days p
REQUIRED SIGNATURE:	:
\mathcal{A}	Unica a. Weaner

Signature of a member or 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.)

Jessica A Weaver

Typed or 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)

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