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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Couto and	Company, LL	.C			
		d Liability Compa	any)		
The enclosed Articles of Organi Please return all correspondence					
Louis Couto					
	(Name of Person)			
Couto and Co	mpany, LLC				
		(Firm/Company)			
8668 Navarre	Pkwy, #22	3			
		(Address)			
Navarre, Flor	rida 32566				2006 OCT 20
rtavario, r ioi		/State and Zip Code)		- CT
For further information concerni	ing this matter, please	call:			A
Louis Couto		at (850	225-08	69	
(Name of Person	n)		& Daytime To	dephone Number)	0
Enclosed is a check for the fo	llowing amount:				
\$125.00 Filing Fee \$\sum \$1\$ Certif	30.00 Filing Fee & ficate of Status	S155.00 Fill Certified Copy (additional copy i	,	\$160.00 Filing Certificate of Statu Certified Copy (additional copy is enc	is &
Regis Divis P.O. I	ng Address tration Section ion of Corporations Box 6327 hassee, FL 32314	Registration of Clifton Bo 2661 Exe	urier Address on Section of Corporation uilding cutive Center ee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Couto and Company, LLC (Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C,")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8668 Navarre Pkwy, #223	8668 Navarra Pkwy, #223
Navarre, Florida 32566	Navarre, Florida 32566
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	ered Agent. You must designate an individual or another
Louis Couto	
Name 8668 Navarre Pkwy, #2	10
	ress (P.O. Box <u>NOT</u> acceptable)
Navarre, City, State, ar	FL 32566

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:

		Name and Address:	
"MGR" = Mana "MGRM" = Ma			
MGRM		Louis Couto	
		8668 Navarre Pkwy, #223	
		Navarre, Florida 32566	
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	if management)		
(Use attachment	II Hocessary)		
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CLE V: Effective effective date is list 0 days after the days	date, if other than the date sted, the date must be speate of filing.) GNATURE: Signature of a member or (In accordance with section	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury	s days prior
CLE V: Effective effective date is list 0 days after the days	date, if other than the date sted, the date must be speate of filing.) GNATURE: Signature of a member or (In accordance with section of this document constitutes)	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury	•

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)