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COVER LETTER

	egistration S ivision of Co			
SUBJECT	: Van	Myels LLC (Name of Limite	ed Liability Company)	
The enclose	ed Articles o	f Organization and fee(s) are s	submitted for filing.	
Please retui	n all corresp	oondence concerning this matte	er to the following:	
		Van Muers		
		Van Myers	Name of Person)	
•	Van	Myers LL		
			(Firm/Company)	
	3 3/4	4 Wildwood	Trail	
			(Address)	
	TALLA	hassee, FC	/State and Zip Code)	
	.; .	(City	/State and Zip Code)	
For further	information	concerning this matter, please	call:	
Vn	My	ers	at (<u>850</u>) <u>491-</u> (Area Code & Daytime T	9128
· · · · ·	(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is	s 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 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 Corporatio Clifton Building 2661 Executive Center	ns Circle .

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Van Myell 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:
(The Limited Liability Company cannot serve as its own Re	3314 Wildwood T/a Tallamss Ce, FC 32712 red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
Florida street	the registered agent are: A
Having been named as registered agent and	to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as

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 (FOUIRED)

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing M	1ember
-	. 1
MGRM	Van Myers 3314 Wildwood Trail
	3314 Wildwood This Tallahossee, FL 32312
	TAMANGET, PC JOIT
	
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(Use attachment if necess	
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ARTICLE IV- Manager(s) or Managing Member(s):

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)