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PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(D6	ocument Number)	
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Friend to Friend (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:	
Jackie Barnes	عشة
(Name of Person)	end
(Firm/Company)	Ę
5974 2844 54	•
5974 284th St Branford, FL 32008	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Jackie Barnes at 386, 867-1320	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\text{Certified Copy (additional copy is enclosed)} \$Certified C	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Friend to Friend 1 (Must end with the words "Limited Liability Company, "Limited	Company of their abbreviation "I I C " or "I C ")
(Must end with the words Entitled Clabinty Company, Entitled	Company of their abbreviation LLC, of L.C., j
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5974 284th St	same
Branford, FL 32008	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the region of the reg	ed Agent. You must designate an individual or another of the property of the p
liability company at the place designated in this registered agent and agree to act in this capacity. statutes relating to the proper and complete perfe	cept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Jackie Barnes
MGRM	Branford, FL 32008 Yancy Arnold 382 Sw Oallas Terr. Ft White, FL 3298
MGRM	Ashley Prevatt 8514 SE CR 405 Branford, FL 32008
MGRM	Barri Harris 6128 26476 St Branford, FL 32008
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the dat (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing: (OPTIONAL) secific and cannot be more than five business days prior
(In accordance with section of this document constitute that the facts stated herei	an authorized representative of a member. 1 606.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury in are true.) Arold or printed name of signee
Filing Fees:	

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

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

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV- Manager(s) or The name and address of each N	Managing Member(s): Manager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MORM	Martie Lewis 24473 415ERd
MGRM	Lisa Speppard 545 SWOOd Niblack
MGRM	Kim Sims 29813 77+hPL
MGRM	Branford, FL 32008 Connic Odom PO BOX 444 Branford, FL 32008
(Use attachment if necessary)	
ARTICLE V: Effective date, if other the late is listed, the date is or 90 days after the date of filing.)	an the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	A Section 1985 A Sec
(In accordance v of this documen	nember of an abthorized representative of a member. with section 608.408(3), Florida Statutes, the execution to constitutes an affirmation under the penalties of perjury stated herein are true.) ONCY ANOLA 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)

The name and address of	f each Manager	or Managing Member is as follows:		
Title: "MGR" = Manager "MGRM" = Managing	Jamhar	Name and Address:		
MGRM - Managing	viember	Tajuana White 1505 Ft Clarke Blv	d#4	703
MGRM		Wesley A Barnes		
		Ft White, FL 32038		
	•			
(Use attachment if nece	ssary)			
CLE V: Effective date, if effective date is listed, the 0 days after the date of fi	date must be sp	te of filing: (Coecific and cannot be more than five bus	PTION. íness da	AL) ys pri
REQUIRED SIGNAT	JRE:	1 01	SECRE.	07 HAR
Signati	of a member of	yap authorized representative of a member.	NSSEE TO	?-2 PH
(In acc of this	ordance with section	m 608.408(3), Florida Statutes, the execution as an affirmation under the penalties of periury	STATE	2: 52
	yancy	Arnold		

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)

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