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DEPARTMENT OF STATE VISION OF CORPORATIONS

07 JUN 20 AM 9: 40
SECRETARY OF STATE
TALLAHASSEE, FLORID.

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COVER LETTER

TO: Registration Se Division of Cor	morations		
SUBJECT: Pau	WOO ZW	ork LL	<u> </u>
	(Name of Limite	d Liability Company)	
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
PAUL	Copeland	5-	
	(Name of Person)	•
· · · · · · · · · · · · · · · · · · ·		(Firm/Company)	PAG 1
0 -	7 / 4		
POI	30x 698	(Address)	22 F
		(Address)	FF. S
ChuHa	hoochee Fr	7 3 2 3 2 4 (State and Zip Code)	F STATE
	(City	/State and Zip Code)	PIE 5
For further information	concerning this matter, please	call:	
		· · · · · · · · · · · · · · · · · · ·	
. (Name	of Person)	at ()(Area Code & Daytime 7	l'elephone Number)
Enclosed is a check for	or the following amount:		
p \$125.00 Filing Fee	ρ \$130.00 Filing Fee & Certificate of Status	ρ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &
,	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporati Clifton Building	ions
•	Tallahassee, FL 32314	2661 Executive Center	er Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC.,")

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Paul (opeland)- 6987 Greens bore Huy Chettehoochee FA 32324	Do Box 698 Chattehoocher FH32324
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	

Mailing Address:

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 Ag nt's Signature (REQUIRED)

(CONTINUED)

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 Member	
Makm	PAUL CopelHad J- PoBox 698 Chattahocchec FA 32324
	SECRET ALLAH
·	20 AM 9: ASSEE FLO
	- ATE
(Use attachment if necessary)	
If an effective date is listed, the date mu	he date of filing: (OPTIONAL) ust be specific and cannot be more than five business days
rior to or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	

Park Cura in 177

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.)

PAUL Copel and Jr

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)