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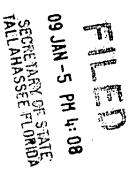
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## **COVER LETTER**

Registration Section
Division of Corporations

TO:

•	SUBJECT: Angel Four LLC
	(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:
	Jeffrey R Hossler
	(Name of Person)
	(D:(C)
	(Firm/Company)
	18350 Vicenza Way
	(Address)
	Miromar Lakes, FL 33913
	(City/State and Zip Code)
	For further information concerning this matter, please call:
	Jeffrey R Hossler
	(Name of Person) (Area Code & Daytime Telephone Number)
	Enclosed is a check for the following amount:
	\$125.00 Filing Fee \$\times \$\text{\$\exintex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$
	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 - Nam		
The name of the Lis	nited Liability Company	/ is:
	Angel Fou	ır LLC
(Mus	et end with the words "Limited I	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Add	lress:	
The mailing address	s and street address of th	e principal office of the Limited Liability Company is:
Principal Office Address:		Mailing Address:
18350 Vicenza Way Mir	omar Lakes, FL 33913	18350 Vicenza Way Miromar Lakes, FL 33913
The name and the F  Having been name liability companies registered agent and	mpany cannot serve as its own Retive Florida registration.)  lorida street address of t  Jeffrey  No.  18350 Vi  Florida stree  Miromar Lake  City, State  d as registered agent and ay at the place designated agree to act in this cape	red Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another  the registered agent are:  R Hossler  ame  Cenza Way  1 address (P.O. Box NOT acceptable)  es, FL 33913  ate, and Zip  I to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and

(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:

"MGR" = Ma		Name and Address:		
	nager Aanaging Member			
MGRM		Jeffrey R Hossler		
		18350 Vicenza Way		
		Miromar Lakes, FL 33913		
	<del></del>			
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### 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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