U200051858

(Re	equestor's Name)	
(Ad	dress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900229367299

04/16/12--01034--011 **125.00

12 APR 16 AMII: #0

COVER LETTER

TO:	Registration Section Division of Corporations	
•		
SUBJI		STER, LLC
	Name of Lim	ited Liability Company
The en	closed Articles of Organization and fee(s) are	e submitted for filing.
Please	return all correspondence concerning this ma	atter to the following:
	Si	teven Custer
		Name of Person
		Firm/Company
	1271 ⁻	1 Pineway Drive
		Address
		rgo, FL 33773
		ity/State and Zip Code
		er58@gmail.com for future annual report notification)
For fur	ther information concerning this matter, plea	·
	Steven Custer	at (727) 644-0010
	Name of Person	Area Code & Daytime Telephone Number
Enclos	sed is a check for the following amount:	
\$125.00	Filing Fee \$\int \\$130.00 \text{ Filing Fee & Certificate of Status}	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy 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 Corporations Clifton Building 2661 Executive Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Li	ne: imited Liability Company	ie.		
The name of the Li	mined Liability Company	13.		
	CUSTE	R, LLC		
(Mu	ust end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Ad	ldress:			
The mailing address	ss and street address of the	e principal office of the Limited Li	iability Company	is
Principal Office A	Address:	Mailing Address:		
12711 Pineway Dri	ve	12711 Pineway Drive		
Largo, FL 33773		Largo, FL 33773		
(The Limited Liability Co	egistered Agent, Registe ompany cannot serve as its own Reactive Florida registration.)	red Office, & Registered Agent's egistered Agent. You must designate an indivi-	s Signature: ridual or another	
The name and the I	Florida street address of th	ne registered agent are:	12 / FALE	
	Steven	Custer	P IL 2 APR 16 EGRETAÑI ALLAHASS	า
	Na	me	- 16 F	_
12711 Pineway Drive			ILED I6 AMÎI: \$0 ARY OF STATE SSEE, FLORIDA	ו פֿ
	Florida street	address (P.O. Box NOT acceptable)	POR NATS NATS	•
	Largo, FL 33773	FL	DA TO	
	City	, State, and Zip		

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)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
Working - Wanaging Memocr	•
MGR	Steven Custer
	. 12711 Pineway Drive
	Largo, FL 33773
(Use attachment if necessary)	
LE V: Effective date, if other that ffective date is listed, the date mu	n the date of filing: (OPTIONAlust be specific and cannot be more than five business day
LE V: Effective date, if other tha	ust be specific and cannot be more than five business day
LE V: Effective date, if other tha ffective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE:	ust be specific and cannot be more than five business day
LE V: Effective date, if other that ffective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a must disconstitutes an affirmation I am aware that any false	ust be specific and cannot be more than five business day
LE V: Effective date, if other that ffective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a must disconstitutes an affirmation I am aware that any false	ast be specific and cannot be more than five business day ARR 12 ARR 15 ARR 16 ARR

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)