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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	isiness Entity Nar	me)
(Ďd	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	NAY #72 2012	
	L. SELLER	s
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO:	Registration Section Division of Corporations		4	<b></b>
SHDI	ECT: Florida Sourcing Soluti	ions LLC		
2000		ed Liability Company		
The e	nclosed Articles of Organization and fee(s) are	submitted for filing.		
Please	e return all correspondence concerning this mat	ter to the following:		
	Holly Kroll			
		Name of Person		
	Florida Sourcing Solutions	s LLC		
		Firm/Company		
	4782 Cains Wren Trail			
		Address		
	Sanford, FI 32771			
		y/State and Zip Code		
	hollykroll@gmail.com E-mail address: (to be used	for future annual report not	ification)	<u> </u>
For fu	rther information concerning this matter, pleas	e call:		
Holl	y Kroll	at ( 407 ) 71	6-7429	
	Name of Person	at ( 407 ) 71	ytime Telephone Numb	per
Enclo	sed is a check for the following amount:			
\$125.0	0 Filing Fee \$\bigsim \\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fe Certified Copy (additional copy is en	Certifica (closed) Certified	Filing Fee, ate of Status & Gopy at copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Couries Registration Se Division of Co Clifton Buildin 2661 Executiv	ection orporations ng e Center Circle	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Name: ne Limited Liability Com	pany is:
Florida S	ourcing Solution	
	(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - The mailing ad		of the principal office of the Limited Liability Company is:
Principal Offi	ce Address:	Mailing Address:
Florida Sourcin 4782 Cains Wr	ng Solutions LLC en Trail	Florida Sourcing Solutions LLC 4782 Cains Wren Trail
Sanford, FL 32	771	Sanford, FL 32771
The name und	Holly Kroll 4782 Cains	Name Wren Trail
	0_ 000	
	Florida	street address (P.O. Box NOT acceptable)
	Florida Sanford	street address (P.O. Box NOT acceptable)  El 32771
		street address (P.O. Box <u>NOT</u> acceptable)  FL 32771  City, State, and Zip
liability con registered age statutes relat	Sanford  named as registered agent  mpany at the place design  ent and agree to act in this  ting to the proper and com	FL 32771

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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGRM Holly Kroli 4782 Cains Wren Trail Sanford, FL 32771 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 05/07/2012 ... (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Filing Fees:

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

Holly Kroll

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee