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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Barnes Lee & Associates

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:

Cory Barnes	i i
Name of Person	
Barnes Lee & Associates	
Firm/Company	SE SE
2175 Kingsley Ave. #318	ZO13 FEB
Address	SS I
Orange Park, Florida 32073	PA F
City/State and Zip Code	O1
JaxBoozelator@gmail.com	24 100 74
E-mail address; (to be used for future annual report notification)	

For further information concerning this matter, please call:

Zachary Lee	_{at} 904	624-3325
Name of Person	Area Code & Daytime Telephone Number	

Enclosed is a check for the following amount:

■\$125.00 Filing Fee U\$130.00 Filing Fee & U\$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)

Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Street/Courier Address

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	THE T
Barnes Lee & Associates, LLC (Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company.
Principal Office Address:	Mailing Address:
2175 Kingsley Ave. #318 Orange Park, Florida 32073	2175 Kingsley Ave. #318 Orange Park, Florida 32073
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 reg	gistered agent are:
Cory Barnes	
Name	
8223 Hewitt St.	
, Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
Jacksonville	FI. 32244
City, State	

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)

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:

Title: "MGR" = Manager "MGRM" = Managing Mem	Name and Address:
<u>MGR</u> .	Zachary Lee 8223 Hewitt St. Jacksonville, FL 32244
MGR	Cory Barnes 8223 Hewitt St. Jacksonville, FL 32244
	FEB IN PH 1: 24
(Use attachment if necessary)
ARTICLE V: Effective date, if othe (If an effective date is listed, the dorior to or 90 days after the date of	r than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days filing.)
REQUIRED SIGNATURE	
Signatures	f a member or an authorized representative of a member.
constitutes an affirma I am aware that any f	section 608.408(3). Florida Statutes, the execution of this document ation under the peralties of perjury that the facts stated herein are true. Also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.)
Cory M. Ba	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)