113000121024

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only

EFFECTIVE DATE 08/26/13



200251054362

08/26/13--01024--012 **130.00

2019 AUG 26 AM II: 57
SEURETARY DE STALE

(AUG 27 2013

D. BRUCE

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Modalytic Name of Limit	S, LLC ed Liability Company	
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this matt	er to the following:	
	Enid Llort		
		Name of Person	
		Firm/Company	
	123 1st st	reet South	# 701
 			· · · -
	Jacksonvill	e Beach, F	L 33\$20 =
	Enid LLor E-mail address: (to be used)	e Beach, F y/State and Zip Code + @ aol. com for future annual report notification)	26 AMIII: 57 ARY OF STATE ASSEE FLORIDA
For further information	concerning this matter, please	call:	SIATE LORIDA
Enic	d Llort of Person	at (904) 853- Area Code & Daytime Telep	-6563
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	X\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Modalytic	s, 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	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
172 15+ 5+ 5 # 201	122 15tst C #771

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

The name and the Florida street address of the registered agent are:

ARTICLE I - Name:

The name of the Limited Liability Company is:

acksonville Beach, Fl

business entity with an active Florida registration.)

Enid Llort	274	~>	
Name	E CA	2013	
123 15t St. S.#701	EREI EAHA	AUG	
Florida street address (P.O. Box NOT acceptable)	ASS AR	26	-
Jacksonville Bch.FL 32250	10 X	>	m
City, State, and Zip	207. 718	=	O

Having been named as registered agent and to accept service of process for the above stated 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



<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGRM	Tania Stewart 123 1st st. S. #701 Jacksonville Bch, FL 322
MGR	Enid Uort 123 1st St. S. # 701 Jacksonville Bch., FL 32:
(Use attachment if necessary)	
CLE V: Effective date, if other the effective date is listed, the date	han the date of filing: <u>8-26-13</u> . (OPTIONAL) te must be specific and cannot be more than five business da ling.)
CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of fine	te must be specific and cannot be more than five business da ling.)
CLE V: Effective date, if other to effective date is listed, the date of or 90 days after the date of fix REQUIRED SIGNATURE: Signature of a (In accordance with sec constitutes an affirmatic I am aware that any fals constitutes a third degree	e must be specific and cannot be more than five business da

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certifled Copy (Optional)
\$ 5.00 Certificate of Status (Optional)