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PICK-UP	☐ WAIT	MAIL
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EXAMINER

COVER LETTER

TO: **Registration Section Division of Corporations** MSCG Holdings 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: Chris Gullickson Name of Person Firm/Company 18585 125th Ave N Address Jupiter, FL 33478 City/State and Zip Code MSCGholdings@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Chris Gullickson Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■\$125.00 Filing Fee □\$155.00 Filing Fee & □ \$160.00 Filing Fee, □\$130.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) **Mailing Address** Street/Courier 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MSCG Holdings LLC			
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	• "	
ARTICLE II - Address:			
The mailing address and street address of	the principal office of the Limited Li	iability C	ompany is
S	1 1	. ,	- F. J
Principal Office Address:	Mailing Address:		
18585 125th Ave N	18585 125th Ave N		
Jupiter, FL 33478	Jupiter, FL 33478		
			
business entity with an active Florida registration.) The name and the Florida street address of	f the registered agent are:		E.5 C.3
Chris Gullickson		N.S.S.	 ICI 28
Chris Gullickson	Name	A SEE	1. 28 Fi
Chris Gullickson 18585 125th Ave N	Name	AHASSEE TH	2013 OUT 28 FH 3
Chris Gullickson 18585 125th Ave N		AHASSEE FLORE	رپې
Chris Gullickson 18585 125th Ave N	Name	AHASSEE, CLORIE	L1 28 PH 3:00
Chris Gullickson 18585 125th Ave N Florida str Jupiter, FL 33478	Name reet address (P.O. Box <u>NOT</u> acceptable)	AHASSEE, FLORIES	رپې

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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 Memb	Name and Address:
MGRM	Chris Gullickson
	18585 125th Ave N
	Jupiter, FL 33478
MGRM	Mark Sedelnik
	100 Turtle Creek Dr
	Tequesta, FL 33469
	OC ART
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	June N
	than the date of filing: (OPTIONAL)
CLE V: Effective date, if other	than the date of filing: (OPTIONAte must be specific and cannot be more than five busine filing.)
CLE V: Effective date, if other effective date is listed, the date of or 90 days after the date of the effective date of the effective date. REQUIRED SIGNATURE:	than the date of filing: (OPTIONAte must be specific and cannot be more than five busine filing.)
CLE V: Effective date, if other effective date is listed, the date of or 90 days after the date of the Equipment of Signature of	than the date of filing: (OPTIONAte must be specific and cannot be more than five busine filing.)
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)