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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
The name of the Emilieu Elucinity Company is:	
Moraine Capital LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
420 Celestial Way, Unit 302	420 Celestial Way, Unit 302
Juno Beach, FL 33408	Juno Beach, FL 33408
ARTICLE III - Registered Agent, Registered	
The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Tyler Walling	
Name	
420 Celestial Way, Unit 302	(DO D NOT ALL)
	ress (P.O. Box <u>NOT</u> acceptable)
Juno Beach, FL 33408	FL
City, Sta	te, and Zip
Having been named as registered agent and to a	accept service of process for the above stated limited
	his certificate, I hereby accept the appointment as
	ty. I further agree to comply with the provisions of
all statutes relating to the proper and complete	e performance of my duties, and lam familiar with
and accept the obligations of my position as reg	gistered agent as provided for in Chapter 608, F.S.
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	/ Mov
Pagistand Agant's Signal	
Registered Agent's Signat	
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(CONTIN	UED)
·	<u> </u>
Page 1 of 2	Taker -

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

	= Manager " = Managing	Member	•
MGR			Tyler Walling
			420 Celestial Way, Unit 302
			Juno Beach, FL 33408
	<u></u>	£	
•	chment if nec		e date of filing: January 1st, 2014 . (OPTION)
LE V: E ffective o	ffective date, i	f other than the the date must ate of filing.)	e date of filing: January 1st, 2014 . (OPTIONA t be specific and cannot be more than five busine
LE V: E ffective o	ffective date, i late is listed, ys after the d RED SIGNAT	f other than the the date must ate of filing.) FURE:	t be specific and cannot be more than five busine
LE V: E ffective o	ffective date, i late is listed, ys after the d RED SIGNAT	f other than the the date must ate of filing.) FURE:	
LE V: E ffective o	ffective date, i late is listed, ys after the d RED SIGNAT Signa (In accordance constitutes and I am aware the	f other than the the date must ate of filing.) TURE: ture of a number with section 608 affirmation under at any false information degree felony	t be specific and cannot be more than five busine

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