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(Requestor's Name)
(Address)
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(Oit (Chate Gird Dhana 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(a.e., e.e., e.e.,
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
g contact of the grant of the g

Office Use Only



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COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT: COC	ly Ellsworth Ra	acing LL	.C	
SUBJECT.	-,	ed Liability Com		
The enclosed Articles	of Organization and fee(s) are	submitted for fili	ng.	
Please return all corre	spondence concerning this mat	ter to the followir	ng:	
Cody i	Ellsworth			
		Name of Person		***************************************
Cody I	Ellsworth Racii	ng LLC	~ •	
		Firm/Company		
106 R	ainbow Fish Ci	ircle		
		Address		
Jupite	r, Fl 33477			
<u>,-</u>	Ci	ty/State and Zip Co	de	5]-
codyaells	sworth@aol.com			and make much
	E-mail address: (to be used	for future annual re	port notification)	54 1
For further information	n concerning this matter, please	e call:		2
Cody Ells	worth	_{at (} 561	307-0519	Jumber F. D.
Nan	ne of Person	Area Co	de & Daytime Telephone N	lumber 5 5
Enclosed is a check	for the following amount:			
■\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fil Certified C (additional co	Copy Cert opy is enclosed) Cert	0.00 Filing Fee, ificate of Status & ified Copy tional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Clifton 2661 E	Courier Address ation Section on of Corporations Building executive Center Circle assee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Cody Ellsworth Racing LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")					
The mailing addre	ess and street addres	s of the principal office of the Limited I	Diability Company is:		
Principal Office	Address:	Mailing Address:			
106 Rainbow Fish Cir	cle	106 Rainbow Fish Circle			
Jupiter, FI 33477		Jupiter, Fl 33477			
(The Limited Liability of business entity with as	Company cannot serve as in active Florida registration Florida street addre Cody Ellsworth 106 Rainbow Fish Cin	ess of the registered agent are: Name			
		· — · · · ·	Common Co		
	3	City, State, and Zip			
liability compo registered agen all statutes rela	any at the place design t and agree to act in uting to the proper ar obligations of my pos	ent and to accept service of process for the gnated in this certificate, I hereby accept this capacity. I further agree to comply and complete performance of my duties, and it is registered agent as provided for gent's Signature (REQUIRED)	the appointment as with the provisions of and I am familiar with		

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
M6R	Cody Ellquorth 106 Rainbon Fish Circle Jupiter, F1 33477
(Use attachment if necessary)	
ICLE V: Effective date, if other than the effective date is listed, the date musto or 90 days after the date of filing.)	e date of filing: 1/1/2014 (OPTIONAL) t be specific and cannot be more than five business d
REQUIRED SIGNATURE:	
Signature of a member	er 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.)

Typed or printed name of signer

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)