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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: STMP Holdings LLC.	FE8
Name of Limited Liability Company	<u>~</u>
The enclosed Articles of Organization and fee(s) are submitted for filing.	G G
Please return all correspondence concerning this matter to the following:	
Ryan P. Tilley	
Name of Person	
STMP Holdings LLC.	
Firm/Company	
2211 Dupont Dr.	
Address	
Pensacola, FL. 32503	
City/State and Zip Code	
ryantilley@gmail.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Ryan Tilley850 \ 393-6521	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\scrip{\subset}\$\$ \$130.00 Filing Fee & Certificate of Status \$\subseteq\$ Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)	l)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Lim	: ited Liability Company is	::				
STMP Holdings LLC.						
	(Must end with the words	s "Limited Lia	bility Company, "L.L.C	.," or "LLC.")	-	
ARTICLE II - Addi	ress: and street address of the p	orincipal office	of the Limited Liability	/ Company is:		
Principal Office Ad	dress:	Mailing A	Address:			
2211 Dupont Dr.			2211 Dupont Dr.		_	
Pensacola, FL. 32503			Pensacola, FL. 32503			
another business enti	y Company cannot serve ity with an active Florida orida street address of the	registration.)				
	Ryan P. Tilley					
		Name				
	2211 Dupont Dr. Florida street address	(P.O. Box <u>NC</u>	<u>OT</u> acceptable)	_		
	Pensacoia		FL 32503			
	City		Zip	_		
the place designate capacity. I further	as registered agent and to ted in this certificate, I her agree to comply with the p I am familiar with and acc Registered Age	reby accept the provisions of al cept the obligat Chapter (appointment as register I statutes relating to the j ions of my position as re	ed agent and agree t proper and complete	o act i perfo	in this ormance
		ONTINUED) Page 1 of 2		SECRETARY OF STATE TALLAHASSEE, FLORIDA	14 FEB 13 23 8:16	

Title:		Name and Address:	
"AMBR" = Authorized	l Member		
"MGR" = Manager			
AMBR	_	Ryan P. Tilley	
		2211 Dupont Dr.	
		Pensacola, FL. 32503	
AMBR		Victor Sokul	
	-	1322 Deer Trail rd	
		Hoover, AL 35226	
		~	
AMBR	_	David Mclean	
		722 Providence Estates Dr. East Mobile AL 36695	
		WILDING AL 30033	
AMBR		Beau Pollard	
	-	208 Sabine Dr.	
		Pensacola, FL 32561	
of filing.)	e date must be specific	ing: (OPTIONAL and cannot be more than five business days prior to) o or 9(
of filing.)	e date must be specific	and cannot be more than five business days prior to) o or 9(
of filing.) E VI: Other provisions,	if any.	and cannot be more than five business days prior to) o or 90
of filing.) E VI: Other provisions, REQUIRED SIGNAT	if any.	and cannot be more than five business days prior to) o or 90
E VI: Other provisions, REQUIRED SIGNAT S (In accordance) Constitute Lam awar	FURE: Signature of a member ance with section 608.0 as an affirmation under that any false information formation and the section of the secti	and cannot be more than five business days prior to or an authorized representative of a member. 2013 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are ation submitted in a document to the Department of States as provided for in s.817.155, F.S.)	o or 90
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REQUIRED SIGNAT S (In accordance on stitute I am awar constitute I a	FURE: Signature of a member ance with section 608.0 as an affiny ation under that any false information a third degree felony: Ryan P. Tilley Typor Articles of Organiz	or an authorized representative of a member. 2013 (1) (b), Florida Statutes, the execution of this document to the Department of States provided for in s.817.155, F.S.)	o or 90