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SECRETAR OF SIGNETATIONS

FAIT AND SECRETARY OF SIGNETARY OF

2/17/14

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ARCYLE ACQUISITION AND MANAGEMENT, LA 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:
Jacqueline Doucette Name of Person
ARBYLE ACQUISITION AND MANAGEMENT, LLC Firm/Company
14305 Sea Eagle Drive
Jacksonville Florida, 32226 City/State and Zip Code
Jakidoucette@yahoo-com Email address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lisa Doucette at (904) 624 - 8078 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee \$\frac{1}{10000000000000000000000000000000000
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	TCI	E.I	- Na	me

The name of the Limited Liability Company is:

Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Addres	15:
14305 Sea 8	Tagle Drive
Jacksonvi	lle ⁹
FLORIDA	32226

14305 Sea Eagle Drive

FLORIDA 32226

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

business entity with an active Florida registration.)

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

Jacqueline Doucette

14305 Sea Eagle DRIVE
Florida street address (P.O. Box NOT acceptable)

Jacksonville FL 32224

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated 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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

THE 20 MID 27
SECRETARY STATE

Title: "AMBR" = Author "MGR" = Manager	rized Me mber	Name and Address:
AMBR	EXECUTIVE OPFICER	Jacqueline Doucette 14305 SEA EAGLE DRIVE JacksonvillE, FLORIDA 32226
AMBR	- FINANCIAL EXECUTIVE OFFICER	LISA Doucette 14305 SEA EAGLE DRIVE JACKSONVILLE, FLORIDA 323
(Use attachment if	necessary)	
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