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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	TO: Registration of	n Section Corporations			
	SUBJECT: Holdst	er, LLC Name of Li	mited Liability Company	·	
		s of Organization and fee(s) a			
	Please return all corr	espondence concerning this n	natter to the following:		
	Kathryn	Smith	Name of Person	 	,
			114110 01 1 010011		
			Firm/Company		
	559 NE	46th Street # 402			
		. .	Address		
	Boca Ra	aton, Florida 33431			
		(City/State and Zip Code		
	kathrynderosie	rs@att.net E-mail address: (to be use	ed for future annual report notifica	ation)	ı
	For further informati	on concerning this matter, ple	ease call:	SECOLUMN ALLAHAS	***************************************
	Kathryn Smith	at (904) 412-2979	25 25 25 25 25 25 25 25 25 25 25 25 25 2	
	Na	me of Person		lephone Number	m
	Enclosed is a check t	for the following amount:		ORIZ ORIZ ORIZ ORIZ ORIZ ORIZ ORIZ ORIZ	
Į.	\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
	<u>M</u> j	ailing Address	Street/Courier Add	LESS.	

Mailing 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

ARTICLE I - Name: The name of the Limited Liability Company is:		
Holdster, LLC		
(Must end with the words "Lin	mited Liability Company, "L.L.C.," or "L	.LC.")
ARTICLE II - Address: The mailing address and street address of the princi	pal office of the Limited Liability Compa	any is:
Principal Office Address:	Mailing Address:	
445 South Street	445 South Street	
Neptune Beach, Florida 32266	Neptune, Beach, Florida 322	66
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its another business entity with an active Florida regist.) The name and the Florida street address of the regist.	own Registered Agent. You must design tration.)	ate an individual or
Kathryn F, Smith	Name	(γ ≥ N)
550 NE 400 Oc. 4 H 004		Mr.
559 NE 46th Street # 204 Florida street address (P.O. Box NOT acceptable)		
·	FL 33431	SE SE
Boca Raton City	Zip	무제 📽
mich	accept the appointment as registered agen sions of all statutes relating to the proper of	nt and agree to act in this and complete performance

(CONTINUED)
Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Laura A. Blunt	
	445 South Street	
	Neptune Beach, Florida 32266	
MGR	Timothy K. Taylor	
	445 South Street	
	Neptune Beach, Florida 32266	
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(Use attachment if necessary)	e of filing: (OPTIONAL)	:
CLE V: Effective date, if other than the date	e of filing: (OPTIONAL)	j
effective date is listed, the date must be sp	pecific and cannot be more than five business days prior to or 94.	Jays at
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te of filing.)	်ာ္ကို ပ	•
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