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(Requestor's Name)	_
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PICK-UP WAIT MAIL	
FICK-OF WAIT WAIL	
(Business Entity Name)	_
(Document Number)	_
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Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
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SECRETARY OF STATE
ALLAHASSEF, FLORIDA

MAR - 6 2014

T. BROWN

## COVER LETTER "

٠.	TO: Registration Section Division of Corporations		
	SUBJECT: CAMCOTS, L.L.C.  Name of	of Limited Liability Company	<del></del>
	The enclosed Articles of Organization and fee	e(s) are submitted for filing.	
	Please return all correspondence concerning the	his matter to the following:	
	LISA B BROWNING	Name of Person	
	<del> </del>	Firm/Company	<del></del>
	10646 EMERALD CHASE DR	Address	
	ORLANDO FL. 32836	City/State and Zip Code	
	ASIL1111@CFL.RR.COM E-mail address: (to be	e used for future annual report notification)	<del></del>
	For further information concerning this matter	, please call:	
	LISA B BROWNING Name of Person	at (_407) 909-0083 Area Code Daytime Telepho	ne Number
	Enclosed is a check for the following amount:		
	\$125.00 Filing Fee State  \$130.00 Filing Fee Certificate of State	s Certified Copy (additional copy is enclosed)	\$160,00 Filing Fee, Certificate of Status & Certified Copy ditional copy is enclosed
	Mailing Address	Street/Courier 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 FLA	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	PEC E T
The name of the Limited Liability Company is:	
CAMCOTS, L.L.C.	SSE
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10646 EMERALD CHASE DR. ORLANDO FL. 32836	10646 EMERALD CHASE DR. ORLANDO FL, 32836
(The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)  The name and the Florida street address of the registered against the PROMANNO.	
LISA B BROWNING Name	<del></del>
Name	
10646 EMERALD CHASE DR	
Florida street address (P.O. Box N	OT acceptable)
ORLANDO	FL 32836
City	Zip
the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ce of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance ations of my position as registered agent as provided for in 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>[itle:</u>	Name and Address:
AMBR" = Authorized Membe	•
MGR" = Manager	
AMBR	LISA B BROWNING
	10646 EMERALD CHASE DR.
	ORLANDO FL. 32836
V: Effective date, if other than	the date of filing:
ctive date is listed, the date mutifiling.)  VI: Other provisions, if any.	the date of filing: (OPTIONAL) st be specific and cannot be more than five business days prior to or
V: Effective date, if other than effective date is listed, the date must filing.)  VI: Other provisions, if any.	st be specific and cannot be more than five business days prior to or
V: Effective date, if other than tive date is listed, the date must filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature  (In accordance with seconstitutes an affirmal I am aware that any factors.)	st be specific and cannot be more than five business days prior to or
V: Effective date, if other than tive date is listed, the date must filing.)  VI: Other provisions, if any.  EEQUIRED SIGNATURE:  Signature  (In accordance with seconstitutes an affirmal I am aware that any faconstitutes a third degree of the seconstitutes a third degree of the seconstitutes at the sec	of a member or an authorized representative of a member. ction 605.0203 (1) (b), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true. lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.)
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