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MAY - 2 2013

T. HAMPTON

COVER LETTER .

Division of Corporations
SUBJECT: Zero Hour Business Solutions, LLC 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:
Shae Burns-Lettieri Name of Person
Zero Hour Business Solutions, LLC Firm/Company
6122 Lake Front Drive Address
Sebring, FL 33876 City/State and Zip Code
shae@zerohourbs.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shae Burns-Lettieri at (757) 322-7333 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
Zero Hour Business Solutions, LLC (Must end with the words "Lin	mited Liability Company, "L.L.C.,	" or "LLC.")
ARTICLE II - Address:		
The mailing address and street address of the princi	ipal office of the Limited Liability	Company is:
Principal Office Address:	Mailing Address:	
6122 Lake Front Drive	6122 Lake Front Drive	
Sebring, FL 33876	<u>Sebring, FL 33876</u>	
another business entity with an active Florida regis The name and the Florida street address of the regis Shae Burns-Lettieri	•	-
	-	
6122 Lake Front Drive Florida street address (P.O	. Box <u>NOT</u> acceptable)	-
Sebring	FL 33876	_
City	Zip	
Shae Burn	accept the appointment as registere sions of all statutes relating to the p	d agent and agree to act in this roper and complete performance
(CONT	TINUED)	
Pag	e 1 of 2	2014 SEI TALI

FILED
2014 APR 28 PM 2: 37
SECRETARY OF STATE

<u>Title;</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Shae Burns-Lettieri
MOR	6122 Lake Front Drive
	Sebring, FL 33876
NA	NA
NA	<u>NA</u>
NA	.NA
(Use attachment if necessary)	
(Ose attachment if necessary)	
E V: Effective date, if other than the dective date is listed, the date must be of filling.)	late of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 d
ective date is listed, the date must be of filing.) E VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 d
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E VI: Other provisions, if any. E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation urily a may a may be a ma	specific and cannot be more than five business days prior to or 90 d
Extive date is listed, the date must be of filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation urily a may a may be a	member or an authorized representative of a member. 1605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. 1607.0203 (1) (b) and the facts stated herein are true. 1607.0203 (1) (b) and the facts stated herein are true. 1607.0203 (1) (b) and the facts stated herein are true.
Extive date is listed, the date must be of filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation ut I am aware that any false in constitutes a third degree for	member or an authorized representative of a member. 1 605.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
EVI: Other provisions, if any. EVI: Other provisions, if any. Signature of a (In accordance with section constitutes an affirmation urily am aware that any false in constitutes a third degree fees. Shae Burns-	Burny - Little and cannot be more than five business days prior to or 90 de Burny - Little and the period of a member of an authorized representative of a member. 1 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State clony as provided for in s.817.155, F.S.) Lettieri Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent

ARTICLE IV-