## L14000083562

(Re	questor's Name)	
(Ad	dress)	
(Ád	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

Registration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

SUBJECT: Jason White V	INVISICING LLC
Name of Limited I	Liability Company ~
The enclosed Articles of Organization and fee(s) are sub-	mitted for filing.
Please return all correspondence concerning this matter to	
Jason White	me of Person
Jason White Vin	V/ Siding LLC m/Company
562/ Graymon	,
Pensacola, F/	32526 ate and Zip Code
E-mail address: (to be used for f	uture annual report notification)
For further information concerning this matter, please cal	1:
	Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status C	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy ditional copy is enclosed)  Lambda S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Malling Address Registration Section	Street/Courier Address Registration Section
Division of Corporations	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:	
Jason White Viny 5. (Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal of	
Principal Office Address:	Mailing Address:
562/ Graymont Ln. Pensacula, Fl 32526	562/Graymont Ln. Pensacola, F1 32526
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration	Registered Agent. You must designate an individual or
The name and the Florida street address of the registered a	agent are:
Jason White	<del>-</del>
Name	
5621 Gray mo	nt Ln
Florida street address (P.O. Box	
Pensacola City	FL 52526
Having been named as registered agent and to accept ser the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions o of my duties, and I am familiar with and accept the obli	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this f all statutes relating to the proper and complete performance igations of my position as registered agent as provided for in er 605, F.S
Jasan Whit	
Registered Agent's Signatu	ESE Z
(CONTINUE	
Page 1 of 2	15 MA 8: 56 NATE FLORIDA

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	- 11 -1
Mc/	Jason White
<b>)</b>	5621 Graymont Ln.
	Pensocola, F1 32526
*	
·····	
<del></del>	
	to the self-self-self-self-self-self-self-self-
(Use attachment if necessary)	
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