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JUN 05 2014 J. HARRIS

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJI	ECT: RAWLICIOUS, LLC Name of Li	mited Liability Com	pany	· 
The en	closed Articles of Organization and fee(s) a	re submitted for fili	ng.	
Please	return all correspondence concerning this n	natter to the following	ng:	
	CARISA N. BERKELEY	Name of Person		
		Firm/Company		
	1654 NE 160 STREET	Address	· · · · · · · · · · · · · · · · · · ·	
	MIAMI/FL 33162	City/State and Zip Co	nde	
	NBERKELEY@HOTMAIL.COM E-mail address: (to be use ; ther information concerning this matter, ple	1	report notifica	ution)
CARIS	SAN, BERKELEY at (at (at (	305 ) <u>4676</u> Area Code		ephone Number
	ed is a check for the following amount:	_		_
<b>실 \$125</b> .0	0 Filing Fee ☐\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Certified Copy (additional copy	· ·	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
-	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Divisio Clifton 2661 E	Courier Adds ation Section n of Corporat Building xecutive Cent ssee, FL 3230	ions er Circle

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name			
The name of the Lim	ited Liability Company is:		
RAWLICIOUS, LL	C		
	(Must end with the words "	Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Add The mailing address		ncipal office of the Limited Liability Company is:	
Principal Office Ad	dress:	Mailing Address:	
1654 NE 160 STREET MIAMI, FL 33162		1654 NE 160 STREET	
		MIAMI, FL 33162	
The name and the Flo	CARISA N. BERKELE	-	
		Name	
1654 NE 160 STREET Florida street address (P.O. Box			
		.O. Box NOT acceptable)	
	MIAMI	FL 33162	
	City	Zip	
the place designa	ited in this certificate, I hereb	ccept service of process for the above stated limited liability company by accept the appointment as registered agent and agree to act in thi wisions of all statutes relating to the proper and complete performan	s

(CONTINUED)

Page 1 of 2

Division of Confession

Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

CARISA N. BERKELEY

Typed or printed name of signee

## Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-