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Office Use Only



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ERM

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sand S Family 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:
Roy B. Smalls Name of Person
S and S Family Firm Company
548 Sandy Shell Dr.
Apollo Beach, FL 33572 City/State and Zip Code
Smalls 843@ yahoo. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Roy B. Smalls JR. at (813) 766-2286 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Status & Certified Copy (additional copy is enclosed) Certified

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:

S and S Family L.L.C.

(Must end with the words "Li	mited Liability Company, "L.L.C., or "LLC.)
ARTICLE II - Address: The mailing address and street address of the prine	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5418 Sandy Shell Dr. Apollo Beach, FL 33572	5418 Sandy Shell Dr. Apollo Beach, Fl. 33572
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its another business entity with an active Florida regis	s own Registered Agent. You must designate an individual or
The name and the Florida street address of the regi	stered agent are:
ROV B. Sm	nalls Jk.
	Name
5418 Sandy	Shell Dr.
Florida street address (P.C	D. Box NOT acceptable)
Apollo Beac	h. FL 33572
City	Zip
the place designated in this certificate. I hereby capacity. I further agree to comply with the provi of my duties, and I am familiar with and accept t	ept service of process for the above stated limited liability company accept the appointment as registered agent and agree to act in this sions of all statutes relating to the proper and complete performance the obligations of my position as registered agent as provided for in Chapter 605, F.S
Reginered Agent's	Signature (REQUIRED)

(CONTINUED)

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14 JUL 16 AM ID: 56

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Roy B. Smalls JR. 5418 Sandy Shell Dr Apollo Beach, FL 33572
(Use attachment if necessary) LE V: Effective date, if other than the date fective date is listed, the date must be spot filing.) LE VI: Other provisions, if any.	of filing:
LE V: Effective date, if other than the date fective date is listed, the date must be spof filing.) LE VI: Other provisions, if any.	of filing:
E V: Effective date, if other than the date fective date is listed, the date must be sport filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under 1 am aware that any false infor	ecific and cannot be more than five business days prior to or 90 o

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