L140 80115047

(Req	uestor's Name)	
(Add	ress)	· · · · · · · · · · · · · · · · · · ·
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(City	/State/Zip/Phone	e #)
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: Epilogue, LLC Name of Li	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	are submitted for filing.	
Please	return all correspondence concerning this n	natter to the following:	
	E. Jean Kelly	Name of Person	
	Enitorus II C		
	Epilogue, LLC	Firm/Company	· · · · · · · · · · · · · · · · · · ·
	4000 Gulf Blvd., # 510	Address	
	Saint Pete Beach, FL 33706-3819	City/State and Zip Code	
<u>je</u>	an.kelly@mindspring.com E-mail address: (to be use	ed for future annual report notifica	ation)
For fur	ther information concerning this matter, ple	ease call:	
Jean I	Kelly at (860) 690-9790 Area Code Daytime Te	lephone Number
		Area code Dayume Te	repriorie (Auribei
	ed is a check for the following amount:	_	
□ \$125.0	00 Filing Fee \$\square\$ \$\square\$\$\$\square\$\$\$\$\$\$\square\$	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Add	ress
	Registration Section Division of Corporations	Registration Section Division of Corporat	tions

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Epilogue,LLC (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 off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4000 Gulf Blvd # 510	4000 Gulf Blvd. # 510
Saint Pete Beach, FL 33706-3819	Saint Pete Beach, FL 33706-3819
another business entity with an active Florida registration. The name and the Florida street address of the registered a E. Jean Kelly	•
Name	
4000 Gulf Blvd., # 510 Florida street address (P.O. Box)	NOT acceptable)
Saint Pete Beach,	FL_33706-3819
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of 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 gations of my position as registered agent as provided for in or 605 FS

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title:	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	
	E.Jean Kelly, MGR
	4000 Gulf Blvd., # 510
	Saint Pete Beach, FL 33706-3819
·	
EV: Effective date, if other than the	date of filing: (OPTIONAL)
(Use attachment if necessary) EV: Effective date, if other than the certive date is listed, the date must be filling.) EVI: Other provisions, if any.	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90
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