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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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(Bu	usiness Entity Nar	me)
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TACK AHASSEE JILORIO

J. Shivers OCT 2 8 28W

COVER LETTER

то:	Registration Section Division of Corporations		
SUBJI	ECT: Big Sun Enterprises L.L.C. Name of L	imited Liability Company	
The en	closed Articles of Organization and fee(s)	are submitted for filing.	
Please	return all correspondence concerning this	matter to the following:	
	Robert J. Huebert	Name of Person	
	Big Sun Enterprises L.L.C.	Firm/Company	
	325 Danube Ave. Apt. 206	Address	
	Tampa, FL 33606	City/State and Zip Code	
<u>ro</u>	bert.huebert@gmail.com E-mail address: (to be us	ed for future annual report notific	ation)
For fur	ther information concerning this matter, pl	ease call:	
Rober	t J. Huebert at (Name of Person	7571) 277-7273 Area Code Daytime Te	elephone Number
Enclos	ed is a check for the following amount:		
\$125.0	00 Filing Fee & Certificate of Status	□\$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 Registration Section	Street/Courier Add Registration Section	
	Division of Corporations	Division of Corpora	

P.O. Box 6327
Tallahassee, FL 32314

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:		
Big Sun Enterprises L.L.C.		
(Must end with the words "L	Limited Liability Company, "L.L.C.," or "L	LC.")
ARTICLE II - Address:		
The mailing address and street address of the prin	cipal office of the Limited Liability Compa	any is:
Principal Office Address:	Mailing Address:	
325 Danube Ave, Apt 206	325 Danube Ave. Apt. 206	
Tampa, FL 33606	Tampa, FL 33606	
(The Limited Liability Company cannot serve as is another business entity with an active Florida reg.) The name and the Florida street address of the reg.	istration.)	ate an individual or
Robert J. Huebert	N	
	Name	
325 Danube Ave. Apt. 2		
Florida street address (P.	O. Box <u>NOT</u> acceptable)	
Tampa	FL 33606	
City	Zip	
Having been named as registered agent and to ac the place designated in this certificate, I hereby capacity. I further agree to comply with the prov of my duties, and I am familiar with and accept	vaccept the appointment as registered agen visions of all statutes relating to the proper of	nt and agree to act in this and complete performance
Registered Agent's	s Signature (REQUIRED)	14 OCT SEGMENT
	ege 1 of 2	TOPH ISSEE FILE

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Robert J. Huebert
	325 Danube Ave. Apt. 206
	Tampa, FL 33606
1400	
MGR	Claire Selius
	305 16th Ave N.
	St. Petersburg, FL 33704
777 1	
[]	
fective date is listed, the date m of filing.)	n the date of filing: <u>January 1, 2015</u> . (OPTIONAL) ust be specific and cannot be more than five business days prior to or 90 or
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ARTICLE IV-