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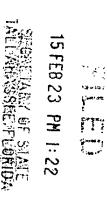
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ARTFULLY INTELLIGENT CO	
Name of I	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:
ROGER PALMER	
	Name of Person
About	
	Firm/Company
360 WEST MCKENZIE STREET	Address
PUNTA GORDA, FL 33950	
	City/State and Zip Code
RGRPALMER@GMAIL.COM E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, p	elease call:
	(941) 585-3942
Name of Person	Area Code Daytime Telephone Number
Control in a shall Control fill.	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\text{Certificate of Status}\$	Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	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:		
ARTFULLY INTELLIGENT CONSULTING, LLC (Must end with the words "Limit	ted Liability Company, "L.L.C.," or "L	IC")
	ou blacking company, b.b.c., or b	
ARTICLE II - Address: The mailing address and street address of the principa	l office of the Limited Liability Compa	ny is:
Principal Office Address:	Mailing Address:	
360 WEST MCKENZIE STREET PUNTA GORDA, FL 33950	360 WEST MCKENZIE STRE	
PONTA GORDA, FL 33950	PUNTA GORDA, FL 33950	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own another business entity with an active Florida registra.) The name and the Florida street address of the register.	wn Registered Agent. You must designation.)	ate an individual or
POCED DALMED		
ROGER PALMER Nai	me	
360 WEST MCKENZIE ST	REET	
Florida street address (P.O. E		
PUNTA GORDA	FL 33950	
City	Zip	
Having been named as registered agent and to accept the place designated in this certificate, I hereby acc capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the Ch	cept the appointment as registered agent ns of all statutes relating to the proper a obligations of my position as registered apter 605, F.S	t and agree to act in this and complete performance
(CONTRIB	NI IED)	35
(CONTIN	·	
Page 1	of2	9388844 4 62 83

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manage:	Name and Address:
MGR	ROGER PALMER
	360 WEST MCKENZIE STREET
	PUNTA GORDA, FL 33950
AMBR	SETH HEYES
	1812 NW 10TH TERRACE
	CAPE CORAL, FL 33993
N/A	N/A
N/A	N/A
Use attachment if necessary)	
ctive date is listed, the date must be f filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 9
ctive date is listed, the date must be filing.) EVI: Other provisions, if any.	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 9
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ctive date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation u I am aware that any false in constitutes a third degree fee	member or an authorized representative of a member. a 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. aformation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.)
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