## L15000051125

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Na	me)
(Doc	cument Number	<u> </u>
Certified Copies	Certificate	s of Status
Special Instructions to I	iling Officer:	





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03/04/15--01016--010 \*\*160.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION:

(10) 3/24/15

## **COVER LETTER**

10:	Division of Corporations	•
SHRIE	ECT: M. O. Moore LLC	
SOBJE		mited Liability Company
The end	closed Articles of Organization and fee(s) a	are submitted for filing.
Please	return all correspondence concerning this r	natter to the following:
	Michael O. Moore	
		Name of Person
	<del></del>	Firm/Company
	988 Blvd of the Arts #312	
		Address
	Sarasota, FL 34236-4834	
	moore28173@aol.com	City/State and Zip Code
<u> </u>		ed for future annual report notification)
For fur	ther information concerning this matter, ple	ease call:
Micha		402 ) 708-7824
	Name of Person	Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:	
<b>□ \$</b> 125.0	00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)  S160.00 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	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

M. O. Moore LL	······································		<del></del>
	(Must end with the words "Lim	nited Liability Company, "L.L.C.," or "LLC."	)
ARTICLE II - A The mailing addre		oal office of the Limited Liability Company is	<b>::</b>
Principal Office	Address:	Mailing Address:	
988 Blvd of the Sarasota, FL 34		988 Blvd of the Arts #312 Sarasota, FL 34236-4834	<del></del>
		ice, & Registered Agent's Signature: own Registered Agent. You must designate a ration.)	n individual or
another business	bility Company cannot serve as its entity with an active Florida registre Florida street address of the registre Michael O. Moore	own Registered Agent. You must designate an ration.) ered agent are:	2018 2018
another business	bility Company cannot serve as its entity with an active Florida registre Florida street address of the registre Michael O. Moore	own Registered Agent. You must designate an ration.) ered agent are:	n individual or DIVISION OF EC
another business	bility Company cannot serve as its entity with an active Florida registre Florida street address of the registre Michael O. Moore	own Registered Agent. You must designate an ration.) ered agent are: ame	SECRETAN OF EOR
another business	bility Company cannot serve as its entity with an active Florida registre Florida street address of the registre Michael O. Moore  988 Blvd of the Arts #312	own Registered Agent. You must designate an ration.) ered agent are: ame	DIVISION OF CORPOR
another business	bility Company cannot serve as its entity with an active Florida registre Florida street address of the registre Michael O. Moore  988 Blvd of the Arts #312  Florida street address (P.O.	own Registered Agent. You must designate an ration.) ered agent are: fame  Box NOT acceptable)	SECRETAN OF EOR

(CONTINUED)

Page 1 of 2

AMBR" = Authorized Member MGR" = Manager  Michael O. Moore 988 Blvd of the Arts #312 Sarasota, FL 34236-4834  Use attachment if necessary)  E.V: Effective date, if other than the date of filing:	Fitle:	Name and Address:
Michael O. Moore  988 Bivd of the Arts #312  Sarasota, FL 34236-4834  (Use attachment if necessary)  E. V.: Effective date, if other than the date of filing:	"AMBR" = Authorized Member	
(Use attachment if necessary)  E. V: Effective date, if other than the date of filing:	"MGR" = Manager	
(Use attachment if necessary)  LE V: Effective date, if other than the date of filing:	AMBR	
(Use attachment if necessary)  E. V: Effective date, if other than the date of filing:		
E V: Effective date, if other than the date of filing:		Sarasota, FL 34236-4834
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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.)  Michael O. Moore  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent		nd cannot be more than five business days prior to or
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.)  Michael O. Moore  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent		nd cannot be more than five business days prior to or
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constitutes a third degree felony as provided for in s.817.155, F.S.)  Michael O. Moore  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	REQUIRED SIGNATURE:  Signature of a member of (In accordance with section 605.0203)	or an authorized representative of a member.  (1) (b), Florida Statutes, the execution of this document
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