## 115000065232

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(Re	equestor's Name)		_
(Ac	ldress)		-
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<b>,</b> .	···· <b>,</b>		
(Ci	ty/State/Zip/Phone ≉	<del>‡</del> )	_
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Name	<b>)</b>	-
			_
(Do	ocument Number)		
Certified Copies	_ Certificates o	of Status	-
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Special Instructions to	Filing Officer:		
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Office Use Only



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## **COVER LETTER**

TO:		ion Section of Corporations				
SUBJE	CT: <u>A</u>	tteboy Services LLC		<del> </del>		
		N	ame of Lin	nited Liability Co	ompany	
The enc	losed Articl	les of Organization ar	nd fee(s) au	re submitted for	filing.	
Please re	eturn all co	rrespondence concern	ing this m	atter to the follow	wing:	
	Rob	ert Attebery		······································	·····	
				Name of Person	on	
	<del></del>			Firm/Compar	іу	
	53	16 Sunset Ave				
				Address		
	Pa	nama City Beach Flori		17.		
			C	ity/State and Zip	Code	
	rol	b.dude@hotmail.com	/a - h	d for future annu	1	
For furtl	ner informa	tion concerning this n			ar report nouries	auon)
Robert A			at ( <u>_</u>		8-2843	<del></del>
	N	lame of Person		Area Code	Daytime Te	lephone Number
Enclose	d is a check	for the following am	ount:			
<b>]</b> \$125.00	Filing Fee	□\$130.00 Filing Certificate of		\$155.00 Fil Certified Co (additional co		☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
		1ailing Address egistration Section			et/Courier Add	ress_
		egistration section		Regi	Sugnon Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Atteboy Services LLC						
	the words "Limi	ted Liability (	Company, "L.L.C	C.," or "LLC.")		
ARTICLE II - Address:						
The mailing address and street addre	ss of the principa	l office of the	Limited Liabili	ty Company is:		
Principal Office Address:		<u>Mailin</u>	g Address:			
5316 sunset ave		5316 s	unset ave			
panama city beach fl 32408			a city beach fl 3	2408		
The name and the Florida street addi-  Robert Atteb  5316 sunset  Florida stree  panama city	ery Na: ave et address (P.O. E	me		SECRÉTAR ( OF STATE PALLAHASSEE, FLORID	15 MAR 23 PM L: 58	THE STATE OF THE S
-	City		Zip	>	٠٠	
Having been named as registered as the place designated in this certif capacity. I further agree to comply of my duties, and I am familiar wi	icate, I hereby acc with the provisio th and accept the	cept the appoi ns of all statu	ntment as registe tes relating to the my position as r	ered agent and agree to proper and complete	o act in perfort	this nance

(CONTINUED)
Page 1 of 2

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR - Manager	Robert Attebery
	5316 Sunset Ave
	Panama City Beach FL 32408
	The second secon
	page at 1
(Use attachment if necessary)	
• •	STAIT EORIG
(Use attachment if necessary)  EV: Effective date, if other than the date of filicative date is listed, the date must be specific of filing.)	STAIT EORIG
E V: Effective date, if other than the date of filicative date is listed, the date must be specific of filing.)	STATE
E V: Effective date, if other than the date of filing the date is listed, the date must be specific of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:	and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date of filisective date is listed, the date must be specific of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member  (In accordance with section 605.020 constitutes an affirmation under the	and cannot be more than five business days prior to or 90  or an authorized representative of a member.  (3 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. In submitted in a document to the Department of State
E V: Effective date, if other than the date of filing.)  E VI: Other provisions, if any.  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a member  (In accordance with section 605.020 constitutes an affirmation under the I am aware that any false information constitutes a third degree felony as p	and cannot be more than five business days prior to or 90  or an authorized representative of a member.  (3 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. In submitted in a document to the Department of State

Page 2 of 2