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(Re	questor's Name)				
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(Cit	y/State/Zip/Phone	#)			
PICK-UP	MAIT	MAIL			
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Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:				
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Office Use Only



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FILED SECRETARY OF STATE OPPOSITED FOR THE SECRETARY OF CORRESPONDEN

~ 04/22/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited I	Liability Company is:		,	ge"		
(Mus	DESIGN WE st end with the words "Limited	レフ Liability Co	mpany, "L.L.C."	or "LLC.")		
ARTICLE II - Address:	treet address of the principal o					
Principal Office Address	<u>:</u>	Mailing .	Address:			
5019 JU 71	PLACE 33155	<u></u> <u>S</u>	ME			
(The Limited Liability Con	ed Agent, Registered Office, mpany cannot serve as its own ith an active Florida registration	Registered A			dual o	r
The name and the Florida	street address of the registered	-	1			
Name					15	9 ¥%
CLARE WHELD Name 5019 SW 71 PLACE					APR	SICK
Florida street address (P.O. Box <u>NOT</u> acceptable)					1	977
	Mismi	<u> </u>	33155 Zip		PA	555 57 57 57 57
	City		Zip		÷.	150 150 1
the place designated in capacity. I further agree	gistered agent and to accept so this certificate, I hereby accept to comply with the provisions familiar with and accept the of Chap	pt the appoint of all statutes	ment as registered is relating to the pro	agent and agree to per and complete	it f com o act in perfor	n this mance
-	Registered Agent's Sign	ature (REQUI	RED)	-		

(CONTINUED)

Page 1 of 2

REQUIRED SIGNATURE:

ARTICLE VI: Other provisions, if any.

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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

MPR - 7 PH 4: 4: