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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LOV DON HARRIS, CLC Name of 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:
MARY LE ARNEST Name of Person
MARY LEARNEST Name of Person EARNEST JI 6 HE LAW FIRM PA Firm/Company
103 NE 4 St. Address
Fort Landerdale FL 33301 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MARY M. EAWIST _{at} (954) 525-5644 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$125.00 Filing Fee \$ Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR LOUDON HARRIS, LLC.

ARTICLE I. NAME.

The name of the limited liability company is Loudon Harris, LLC.

ARTICLE II. NATURE OF BUSINESS AND POWERS

The general nature of the business to be transacted by this limited liability company is to engage in any and all business permitted under the laws of the State of Florida.

ARTICLE III. MAILING ADDRESS.

The address of the principal office of the limited liability company is: 757 SE 17th Street, #682, Fort Lauderdale, FL 33316 and the mailing address of the limited liability company is: 757 SE 17th Street, #682, Fort Lauderdale, FL 33316.

ARTICLE IV. REGISTERED AGENT AND INITIAL REGISTERED OFFICE.

The Registered Agent and the street address of the initial Registered Office of this limited liability company in the State of Florida shall be: Graeme Loudon, 757 SE 17th Street, #682, Fort Lauderdale, FL 33316.

ARTICLE V. MANAGERS AND MANAGING MEMBERS

Array

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
AMBR:	Graeme Loudon	
	757 SE 17th Sheet Apt #062	500 2
	ron Eaddendale, FL 33310	T U M
AMBR:		
	757 SE 17th Street Apt #682	DE TO
	Fort Lauderdale, FL 33316	

ARTICLE VI. BANKING

Graeme Loudon and Lauren Harris are authorized to designate any bank or depositary for the funds of this limited liability company. Graeme Loudon and Lauren Harris are hereby authorized to draw checks on the account, sign checks on behalf of this limited liability company, make deposits on behalf of this limited liability company, open and close accounts on behalf of this limited liability company, obtain cashier's checks, send wires and take such additional action as he deems necessary or appropriate to carry out and accomplish the business of this limited liability company.

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, A.S.

Signature of a member or an authorized representative of a member.

Signature of y member or an authorized representative of a member.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 60.1, R.S.

Registered Agent's Signature

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