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COVER LETTER

	egistration Section ivision of Corporations	
SUBJECT	PRISCO JANETT HOLDINGS, L	ıc
JOBOLC:		imited Liability Company
The enclos	ed Articles of Organization and fee(s)	are submitted for filing.
Please retu	rn all correspondence concerning this	matter to the following:
	TAMMIE K FREUDENBERGER	
		Name of Person
		Firm/Company
	907 JASON DR	
		Address
	NICEVILLE, FL 32578	
	tkfcpa@yahoo.com	City/State and Zip Code
-		ed for future annual report notification)
For further in	nformation concerning this matter, plea	ase call:
	TAMMIE FREUDENBERGER	850 582-4718
	Name of Person	Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:	
\$125.00 Fi	•	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I - Name:

The name of the Limited Liability Company is:

15 JUN 29 PM 2: 41

SECRETARY OF STATE TALLAHASSEE. FLORIDA

PRISCO JANETT HOLDINGS, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

<u>Principal</u>	Office Address:		Mailing Address:
907 JASON DR		ģ	907 JASON DR
NICEVILLE, FL 3257	8		NICEVILLE, FL 32578
ARTICLE III - Registered Agen (The Limited Liability Company c another business entity with an ac The name and the Florida street ac	annot serve as its ow tive Florida registrat	n Registered Age ion.) ed agent are:	Agent's Signature: int. You must designate an individual or
	007 IA CON IND	Name	
	907 JASON DR Florida street addre	ess (P.O. Box NO	T accentable)
	o. ida on cot addit	.55 (1 .O. DOX <u>110</u>	uoseptuote)
	NICEVILLE	FL	32578
	City	State	Zip

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 605, F.S.

Registered Agent's Signature (REQUI)

(CONTINUED)

Page 1 of 2



AMBR PRISCO ADRIAN JANETT VEIA SOMAREIVA 15 CII-7460 SAVOGNIN SWITZERLAND (Use attachment if necessary) E.V: Effective date, if other than the date of filing:	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	SACRETARY OF S' TALLAHASSEE. FI.C
(Use attachment if necessary) E. V: Effective date, if other than the date of filing:		PRISCO ADRIAN JANET	rr
(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:		CH-7460 SAVOGNIN SW	/ITZERLAND
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E V: Effective date, if other than the date of filing:			
E. V: Effective date, if other than the date of filing:			
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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	EV: Effective date, if other than the d	date of filing:	. (OPTIONAL)
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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	ective date is listed, the date must be of filing.) If the date inserted in this block does not ment's effective date on the Department.	e specific and cannot be more than five be of meet the applicable statutory filing req	ousiness days prior to or 90
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