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SECRETARY OF STATE

2015 AUG 14 AH 9: 48

COVER LETTER

	istration Section sion of Corporations
SUBJECT:	Bartley Services LLC Name of Limited Liability Company
	/ 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:
-	Juson 13on Tley Name of Person
	Bartley Services LLC TO A Hoppy Rescreen Ll
	5742 Murdock Lut. Sorosota, Ft 34231 Address
4 	Sarasoya, FL 34231 City/State and Zip Code
	Jason W Bartley 6 amail: com E-mail address: (to be used for future annual report notification)
For further info	ormation concerning this matter, please call:
<u>J.</u>	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 Filir	Samples Signature of Status Signature (additional copy is enclosed) Signature of Status Signature (additional copy is enclosed) Signature of Status Signature (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLE I - Name:
The name of the Limited Liability Company is:

A Happy Resures Lab.

(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:

Principal Office Address:	Mailing Address:
5742 Murdock Auc.	5742 Mundock Ave
Sarasota, F/ 34231	Sara so/a, FL 34231

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Jason B	ar Mey	/
	Name	1
5742 Me Florida street addres		
Sara sola	FL	34231
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.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Autho "MGR" = Manage	
mgR	Joson W. Burrley
/	5742 Hurdock AVE.
	30/050/a/ KL 3423/
 	
If an effective date is liste he date of filing.)	te, if other than the date of filing: (OPTIONAL) d, the date must be specific and cannot be more than five business days prior to or 90 days after
	in this block does not meet the applicable statutory filing requirements, this date will not be listed as ate on the Department of State's records.
RTICLE VI: Other provi	gions, if any. 5 The Right paper work to truns for my Bor My rany's EIN to A Hoppy Reserved LLC. go Forward with A Hoppy Reserved LLC. Thouse you
services com	Dany's EIN TO A HOPPY RESCREEN LUC.
Menling to	go Forward with + Huppy Reserved LLC. Thunk you
•	· · · · · · · · · · · · · · · · · · ·
REQUIRED SIG	NATURE:
	/Mr/m
	Signature of a member or an authorized representative of a member.
	his document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
l C	am aware that any false information submitted in a document to the Department of State onstitutes a third degree felony as provided for in s.817.155, F.S.
C	
	Jason Bartley
	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)