## L15000143835

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

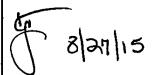
Office Use Only



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## **COVER LETTER**

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TO: Registration of	on Section Corporations		
SUBJECT: Soulfi	Il Root, L.L.C. Name of Lir	nited Liability Company	
	es of Organization and fee(s) a	,	
<u>Stepha</u>	nia Braddon	Name of Person	
<u>Soulful</u>	Root, L.L.C.	Firm/Company	· · · · · · · · · · · · · · · · · · ·
<u>1</u> 308 V	ictoria Drive	Address	
West P	alm Beach, FL 33406	City/State and Zip Code	
SoulfulRoot76	gmail.com E-mail address: (to be use	d for future annual report notific	ation)
For further informat	ion concerning this matter, ple		
Stephania Braddo Na	n at (	561 ) 541-8029 Area Code Daytime Te	elephone Number
Enclosed is a check	for the following amount:		
☐ \$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☑\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>M</u>	ailing Address	Street/Courier Add	<u>ress</u>

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

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## FILED

	FILED
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ARTICLES OF ORGANIZATION FO	R FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	SEGNETARY OF STATE FALLAHASSLE, FLORIDA
Soulful Root, L.L.C. (Must end with the words "Limit	ed 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:
1308 Victoria Drive West Palm Beach, FL 33406	1308 Victoria Drive West Palm Beach, FL 33406
ARTICLE III - Registered Agent, Registered Offic (The Limited Liability Company cannot serve as its ovanother business entity with an active Florida registration of the name and the Florida street address of the register	wn Registered Agent. You must designate an individual or tion.)
Stephania Braddon	<del></del>
Nar	me
1308 Victoria Drive	
1308 Victoria Drive Florida street address (P.O. B	Box NOT acceptable)
	Sox NOT acceptable)  FL 33406
Florida street address (P.O. B	

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<u> Fitle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Stephania Braddon
	1308 Victoria Drive
	West Palm Beach, FL 33406
<del></del>	
	· · · · · · · · · · · · · · · · · · ·
V: Effective date, if other than the ctive date is listed, the date must i	e date of filing: (OPTIONAL)  De specific and cannot be more than five business days prior to or
EV: Effective date, if other than the ctive date is listed, the date must if filing.)	e date of filing: (OPTIONAL)  De specific and cannot be more than five business days prior to or
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Use attachment if necessary)  E.V: Effective date, if other than the ctive date is listed, the date must If filing.)  E.VI: Other provisions, if any.	e date of filing: (OPTIONAL)  the specific and cannot be more than five business days prior to or
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CV: Effective date, if other than the ctive date is listed, the date must if filing.)  CVI: Other provisions, if any.  REOUIRED SIGN TURE.  Signature of the constitutes an affirmation I am aware that any false constitutes a third degree	a nember or an authorized representative of a member. on 603.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)
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