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(Ře	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nam	е)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

	gistration Section vision of Corporations	
SUBJECT		nterprises LLC ame of Limited Liability Company
	191	ame of Emitted Liability Company
The enclose	ed Articles of Organization an	d fee(s) are submitted for filing.
Please retur	n all correspondence concern	ing this matter to the following:
	Joyce A. Russell	
		Name of Person
	Southby Marketing Er	· · · · · · · · · · · · · · · · · · ·
		Firm/Company
	120 NW 39th St	
		Address
	Oakland Park, FL 33	3309
	:	City/State and Zip Code
_	jrussell0594@yahoo	to be used for future annual report notification)
For further in	formation concerning this ma	•
	Joyce A. Russell	at ( 754 ) 300-9726
_	Name of Person	Area Code Daytime Telephone Number
Enclosed is	a check for the following amo	ount:
\$125.00 Fil	ing Fee \$130.00 Filing Certificate of	
	Mailing Address	Street Address

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")	ı
ICLE II - Address:		
nailing address and street address of the principal office o	f the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
120 NW 39th St	120 NW 39th St	;
Oakland Park, FL 33309	Oakland Park, FL 33309	
		:

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

**ARTICLE 1 - Name:** 

Joyce A. Russell		
·	Name	
120 NW 39th St		
Florida street address	(P.O. Box NOT	ecceptable)
Oakland Park	FL	33309
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 t of 2

Title:		Name and Address:	
AMBR" = Authorized	Member	<del></del>	
MGR" = Manager			
_AMBR		Joyce A. Russell	
-		120 NW 39th St	
		Oakland Park, FL 33309	
		•	
		<del>- ·</del>	
EV: Effective date, if or	her than the date of filing	g: nd cannot be more than five business	
EV: Effective date, if or ctive date is listed, the filling.) the date inserted in this	her than the date of filing date must be specific at block does not meet the	applicable statutory filing requiremen	days prior to or 90
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E V: Effective date, if of ective date is listed, the filing.) the date inserted in this nent's effective date on E VI: Other provisions, i	block does not meet the the Department of State fany.  JRE:  gnatyfe of a member of granter with section under are that any false informies a third degree felony.	e applicable statutory filing requirements's records.  The an authorized representative of a result of the control of the cont	ts, this date will not this date will not member. Coution of this documentated herein are true

ARTICLE IV-

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)