L1500015099

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09/10/15--01004--027 **160.00

W. Painter 9/10/15

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Honey Pew's LLC 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:
Pandrew Low Name of Person
Name of Person
Honey Dews LLC Firm/Company
The Company
PQ BOX 56
Address
Wood Ville FL 32362
Shadowolf 33.5b and Il-con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Andrew LOW at (\$50) 841-9664
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{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

Z :

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:

William Joseph Birdsons

Name

9008 Aspen Ct.

Florida street address (P.O. Box NOT acceptable)

Tollahrssee Fl 32305

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 (REQUIRED)

(CONTINUED)

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Use attachment if necessary)		
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VI: Other provisions, if any.		
FOIIDED SIGNATURE.		
REQUIRED SIGNATURE	IN ZO	
Signatur	re of a member or an authorized representative of a	a member.
Signatur This documen	t is executed in accordance with section 605.0203 (1)	(b), Florida Statutes.
Signatur This documen I am aware tha	re of a member or an authorized representative of a tis executed in accordance with section 605.0203 (1) tiany false information submitted in a document to the ird degree felony as provided for in s.817.155, F.S.	(b), Florida Statutes.
Signatur This documen I am aware tha constitutes a th	t is executed in accordance with section 605.0203 (1) tany false information submitted in a document to the ird degree felony as provided for in s.817.155, F.S.	(b), Florida Statutes.
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ARTICLE IV-

Page 2 of 2

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

