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SECRETARY OF STATE PALLAMASSEE. FLORIDA

AND FILED



COVER LETTER

	Registration Section Division of Corporations	
eud iec	92659267 Mendoza LLC	
SUBJEC		e of Limited Liability Company
The enclos	sed Articles of Organization and t	ee(s) are submitted for filing.
Please retu	urn all correspondence concerning	this matter to the following:
	Walter Engelken	
		Name of Person
	Raymond Walter Properties LL	С
		Firm/Company
	4850 N. Mapleview Way	
		Address
	Beverly Hills, FL 34465	
	leaseright123@gmail.com	City/State and Zip Code
	E-mail address: (to	be used for future annual report notification)
For further i	nformation concerning this matte	r, please call:
	Walter Engelken	352 697-0770 at ()
	Name of Person	Area Code Daytime Telephone Number
Enclosed i	s a check for the following amour	nt:
] \$125.00 F	iling Fee \$130.00 Filing For Certificate of Sta	see & \$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section	Street Address New Filing Section

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 16 PM 2: 44

ARTICLE	l - 1	Na	me:
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The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE FLORIDA

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(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:
4850 North Mapleview Way	4850 North Mapleview Way
Beverly Hills, FL 34465	Beverly Hills, FL 34465

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:

Walter Engelken		
,	Name	
4850 North Mapley	iew_Way	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
Beverly Hills	FL	34465
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)

Page 1 of 2

(CONTINUED)



Title: "AMBR" = Autho "MGR" = Manago	er	Name and Address:	SECRETARY OF STATE TAILAHASSEE, FLORIDA
AMBR		Raymond Walter Properties LLC	
		4850 North Mapleview Way	
		Beverly Hills, FL 34465	
			
			
(Use attachment it	f necessary)		
RTICLE V: Effective dat	te, if other than the date of filing:		(OPTIONAL)
f an effective date is listed the date of filing.) lote: If the date inserted in the document's effective date	d, the date must be specific and in this block does not meet the a late on the Department of State's	I cannot be more than five busine pplicable statutory filing requirem	ss days prior to or 90 days after
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\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)