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SECRETARY OF STATE TALLAND SSEE, FI ORIDA

OCT 28 2015

COVER LETTER

C. EM

	Registration Section Division of Corporations	
SUBJECT	CajunSpearlt LLC	
SOBSECT	Name of Limited Liability Company	14: E1=
The enclos	losed Articles of Organization and fee(s) are submitted for filing.	
Please retu	eturn all correspondence concerning this matter to the following:	
	Troy Boudreaux	
	Name of Person	
	CajunSpearlt LLC	
	Firm/Company	
	7032 Plank Drive	
	Address	
	Pensacola, FL 32526	
	City/State and Zip Code tdboud@gmail.com	
	E-mail address: (to be used for future annual report notification)	
For further	er information concerning this matter, please call:	
	Troy Boudreaux 850 449-6865 at ()	
	Name of Person Area Code Daytime Telephone No	umber .
Enclosed i	d is a check for the following amount:	
\$125.00 F	Certificate of Status Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy dditional copy is enclosed
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				SECRETAR TALLAHASS	LED Y OF STATI
The name of the Limited Liability	ty Company is:				
				15 OCT 21	PM 12: 0 1
CajunSpearIt LLC					11112-01
(Must end	with the words "Limite	d Liability Comp	any, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street a	ddress of the principal o	office of the Limi	ted Liability Company is:		
<u>Princip</u>	al Office Address:		Mailing Add	lress:	
CajunSpearIt LLC		(CajunSpearIt LLC		
7032 Plank Drive		7	032 Plank Drive		
Pensacola, FL 325	26	——————————————————————————————————————	ensacola, FL 32526		
The name and the Florida street	address of the registered Troy Boudreaux	d agent are:			
	110y Doubled	Name			
	7032 Plank Drive				
	Florida street addres	ss (P.O. Box NO	[acceptable)		
	Pensacola	FL	32526		
	City	State	Zip		
Having been named as registered of place designated in this certificate, further agree to comply with the pram familiar with and accept the ob	I hereby accept the app ovisions of all statutes r	ointment as regis elating to the pro	tered agent and agree to act per and complete performar	t in this capacity. I ace of my duties, ar	7

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Yvonne Boudreaux
	7032 Plank Drive
	Pensacola, FL 32526
MGR	Troy Boudreaux
	7032 Plank Drive
	Pensacola, FL 32526
	
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EV: Effective date, if other than the date ective date is listed, the date must be sp of filing.)	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90
ective date is listed, the date must be sp of filing.)	e of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
E V: Effective date, if other than the date ective date is listed, the date must be sp of filing.) the date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any.	e of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not of State's records.
E V: Effective date, if other than the date ective date is listed, the date must be sp of filing.) the date inserted in this block does not rement's effective date on the Department E VI: Other provisions, if any.	e of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not of State's records.
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ARTICLE IV-

Page 2 of 2