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SECRETARY OF STATE

15 NOV -2 PM 4: 38



COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	ReCliq LLC	
SODJE		Name of Limited Liability Company
The end	closed Articles of Organization a	and fee(s) are submitted for filing.
Please 1	return all correspondence concer	rning this matter to the following:
	Brandon Kaller	
		Name of Person
	ReCliq	
		Firm/Company
	1248 Monroe Street	
		Address
	Hollywood, Florida 33019	
		City/State and Zip Code
	rocky.kaller@gmail.com	to be used for future annual report notification)
For furth	er information concerning this n	
	Brandon Kaller	954 9374366
	Name of Person	at () Area Code Daytime Telephone Number
Enclose	ed is a check for the following an	mount:
] \$125.0	0 Filing Fee \$130.00 Fili Certificate of	

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

15 NOV -2 PM 4:38

ARTICLE I - Name:

The name of the Limited Liability	Company is:			SECRETARY OF
ReCliq LLC				
(Must end w	ith the words "Limit	ed Liability Compa	any, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	lress of the principal	office of the Limit	ted Liability Company is:	
<u>Principal</u>	Office Address:		Mailing Add	dress:
1248 Monroe Street Hollywood, Florida 33	019		248 Monroe Street ollywood, Florida 33019	
ARTICLE III - Registered Agen (The Limited Liability Company c another business entity with an ac	annot serve as its ov	vn Registered Ager		ndividual or
The name and the Florida street ad	ldress of the register	ed agent are:		
	Brandon Kaller			
		Name		
	1248 Monroe Stree	t		
	Florida street addre	ess (P.O. Box <u>NO</u>	[acceptable)	
	Hollywood	Florida	33019	

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..

State

City

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	SECRETARY OF STATE
"MGR" = Manager	I and a Millian Colo	the many of the state of
AMBR	Jonathan Weitzenfeld 20003 Pergola Bend Lane	
	Tampa, Florida 33647	
	Tampa, Tionda 55047	
AMBR	Brandon Kaller	
	1248 Monroe Street	
	Hollywood, Florida 33019	
l con		
MGR	Rodrigo Borjas	
	1001 Ocala Road	
	Tallahassee, Florida 32304	
MGR	Brad Fretti	
	2520 Northwest 106th Avenue	
(Use attachment if necessary)	Coral Springs, Florida 33065	
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Typed or printed name of signee

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Brandon Kaller