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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SELRETARY OF STATE

11/16/15

COVER LETTER

то:	Registration Section Division of Corporations		
SUBJEC	SpeedFreakz		
5003150		Limited Liabili	ity Company
The encl	osed Articles of Organization and fee(s) are submitted	for filing.
Please re	eturn all correspondence concerning this	matter to the f	ollowing:
	Mario Lowe		
		Name of	Person
	SpeedFreakz LLC.		
		Firm/Co	mpany
	1049 W Riviera Blvd		
		Addre	ess
	Oviedo, FL 32765		
	mariolowe80@gmail.com	City/State and	d Zip Code
	E-mail address: (to be us	sed for future a	nnual report notification)
For further	r information concerning this matter, ple	ease call:	
	Mario Lowe	678 (468-9681)
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	is a check for the following amount:		
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certific	O Filing Fee & S160.00 Filing Fee, Certificate of Status & 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 Fallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE I - Name: the name of the Limited Lin	ability Company is:		
SpeedFreakz LL			
(Must	end with the words "Limited	d Liability Company	v, "L.L.C.," or "LLC.")
RTICLE II - Address: he mailing address and stre	eet address of the principal of	office of the Limited	Liability Company is:
<u>Pri</u>	ncipal Office Address:		Mailing Address:
83 Geneva Dr. #	622014	DO I	DOV #633014
OJ Geneva Dr. #	022714	PO I	BOX #622914
Ovideo, FL 3276 RTICLE III - Registered	Agent, Registered Office,	Ovie	edo, FL 32762
Ovideo, FL 3276 RTICLE III - Registered the Limited Liability Compother business entity with	Agent, Registered Office,	& Registered Ager Registered Agent. Von.)	edo, FL 32762
Ovideo, FL 3276 RTICLE III - Registered The Limited Liability Compother business entity with	Agent, Registered Office, pany cannot serve as its owr an active Florida registration	& Registered Ager Registered Agent. Von.)	edo, FL 32762
Ovideo, FL 3276 RTICLE III - Registered The Limited Liability Compother business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration reet address of the registered	& Registered Ager Registered Agent. Von.)	edo, FL 32762
Ovideo, FL 3276 RTICLE III - Registered The Limited Liability Compother business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration reet address of the registered	& Registered Agent. Von.) d agent are:	edo, FL 32762
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Ovideo, FL 3276 RTICLE III - Registered The Limited Liability Component business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration reet address of the registered Chaunte Lowe 83 Geneva Dr. #6229	& Registered Agent. Von.) d agent are: Name	edo, FL 32762 nt's Signature: You must designate an individual or

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 1 of 2

MARINGR" = Manager AMBR Mario Lowe 83 Geneva Dr. #622914 Oviedo, FL 32762 Chaunte Lowe 83 Geneva DR. #622914 Oviedo, FL 32762 Use attachment if necessary) V. Effective date, if other than the date of filing: (OPTIONAL) trive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not sent's effective date on the Department of State's records. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Mario Lowe Typed or printed name of signee Filing Fees; \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	Title:	Name and Address:
AMBR Mario Lowe 83 Geneva Dr. #622914	"AMBR" = Authorized Member	
AMBR Chaunte Lowe 83 Geneva DR. #622914 Oviedo, FL 32762 Chaunte Lowe 83 Geneva DR. #622914 Oviedo, FL 32762 V: Effective date, if other than the date of filing: (OPTIONAL) tive date is listed, the date must be specific and cannot be more than five business days prior to or 90 (filing.) he date inserted in this block does not meet the applicable statutory filing requirements, this date will not ent's effective date on the Department of State's records. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Mario Lowe Typed or printed name of signee Filing Fees; \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)		M . 7
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ARTICLE IV-

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