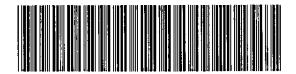
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(Ke	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

	legistration Section Pivision of Corporations	
SUBJECT	Living Wage	
SUBJECT		f Limited Liability Company
The enclos	sed Articles of Organization and fee(	(s) are submitted for filing.
Please retu	urn all correspondence concerning the	is matter to the following:
	Allen Joseph	
		Name of Person
	Living Wage	
		Firm/Company
	571 Oakland Ave. East Apt. A	
		Address
	Tallahassee, FL 32301	
	allenjoseph@hotmail.com	City/State and Zip Code
	E-mail address: (to be	used for future annual report notification)
For further i	information concerning this matter, p	please call:
	Allen Joseph	850 264-1805
	Name of Person	Area Code Daytime Telephone Number
Enclosed i	s a check for the following amount:	
\$125.00 F	iling Fee \$130.00 Filing Fee Certificate of Status	
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327	Street Address New Filing Section Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LIVING WAGE, LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

The mailing address and street address of the principal office of the Limited Liability Company is:

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

**Principal Office Address:** 

another business entity with an active Florida registration.)

**ARTICLE I - Name:** 

**ARTICLE II - Address:** 

The name of the Limited Liability Company is:

The name and the Florida street address of the registered agent are:			
DAVID SAWII			
2472 FARINGDON DP	<b>,</b> '		
Florida street address (P.O. Box NOT acceptable)			
TALLAHADELE FL. 3230	3		
City State J Zip			
Having been named as registered agent and to accept service of process for the above stated limited liability complace designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this cafurther agree to comply with the provisions of all statutes relating to the proper and complete performance of my am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.	ipacity. I duties, and		
Land Jack			
Registered Agent's Signature (REQUIRED)			
(CONTINUED)	SECS:	16 FE	<u> </u>
Page 1 of 2	お名	1 8 P	語

571 OAKLAND AVE. ENTAPT. A 571 OAKLAND AVE. ENTAPT. A
TALLAHASSEE, FL 32301
TALLAHASSEE, FL 32301

Title:  "AMBR" = Au  "MGR" = Mai	uthorized Member	Name and Address:		
MGR	mger	Allen Joseph		
		571 Oakland Ave. East Apt. A	·, ·······	
		TALLAHASSEE, FL 3230	1	
			<del></del>	
			<del></del>	
<del> </del>	<del></del>			
			<u>.</u>	
(Use attachme	nt if necessary)			
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