## L/600004280/

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Concepts of Bea
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Beatrice Galrot
Name of Person
420 East Sayton Circle
Ft. Landerdale, FL 333/2
5. galio+1@ gmail. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Beatrice Galrot at 954 394-6282  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \ \text{Status Filing Fee & Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ \ Certi
Mailing Address Street Address

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

. . .

ARTICLE I - Name: The name of the Limited Liability Company is:  (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:  Blatrice bairot  420 Fast bayton (xcle 420 Fast bayton (xcle Ft. Landerdate, FL 333/2 Ft. Landerdate, FL 333/2
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:    Delitative out of     Name
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 positional registered agent as provided for in Chapter 605, F.S  Registered Agent's Signature (REQUIRED)
(CONTINUED)

Page 1 of 2

18 FEB 24 PM 3: 34

"MGR" = Manager	Beatrice Gallot
	Fr. Landerdale, FL 3331
	<u> </u>
Use attachment if neces	arv)
V: Effective date, if other cases, if other cases, the case is listed, the cases, in t	er than the date of filing:
V: Effective date, if other tive date is listed, the offiling.) he date inserted in this learn's effective date on the office of the office date.	ate must be specific and cannot be more than five business days prior to or 90 lock does not meet the applicable statutory filing requirements, this date will not be Department of State's records.
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EV: Effective date, if out crive date is listed, the of filing.) the date inserted in this benefits effective date on the EVI: Other provisions, if EVI: Other provisions, if EVI: This doe I am awa	RE:  mature of a member or an authorized representative of a member.  ment is executed in accordance with section 605.0203 (1) (b), Florida Statutes, re that any false information submitted in a document to the Department of State.

ARTICLE IV-

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