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(Requestor's Name)					
(Address)					
(Address)					
•					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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	legistration Section Pivision of Corporations						
SUBJECT	Holly's Pursuits						
SUBJECT	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:							
	Holly Lowmiller						
Name of Person							
	Firm/Company						
	16 Derby Downs Circle						
		Address					
	Niceville, FL 32578						
		City/State and Zip Code					
	lularochollylowmiller@gmail.com	10.0					
	E-mail address: (to be i	sed for future annual report notification)					
For further i	nformation concerning this matter, p	ease call:					
	Holly Lowmiller	850 687-0545					
	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	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)					
	Mailing Address New Filing Section	Street Address New Filing Section					

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

<i>-</i> •			
Company is:			
ith the words "Limited	d Liability Compar	ıy, "L.L.C.," or "LLC.")	
dress of the principal o	office of the Limite	d Liability Company is:	
Office Address:		Mailing Address:	
le		Derby Downs Circle	
	Nic	ceville, FL 32578	
Idress of the registered	d agent are:	····	
16 Derby Downs Circle			
		•	
		32578 Zip	
tent and to accept serv hereby accept the app visions of all statutes r gations of my position	ice of process for the cointment as registe elating to the proper as registered agent	ne above stated limited liability company at the red agent and agree to act in this capacity. I er and complete performance of my duties, and a provided for in Chapter 605, F.S	
	dress of the principal of LOffice Address: le nt, Registered Office, cannot serve as its own trive Florida registration didress of the registered Holly Lowmiller 16 Derby Downs Cirp Florida street address Niceville City gent and to accept serve thereby accept the approxisions of all statutes regations of my position	dress of the principal office of the Limite LOffice Address: le	

Page 1 of 2

·	Title: "AMBR" = Authorized	Member	Name and Address:	
	"MGR" = Manager MGR		Haller I assessibles	
			Holly Lowmiller 16 Derby Downs Circle	
			Niceville, FL 32578	
			,	
			44 - 44	
	(Use attachment if neces	sarv)		
	•			
ARTICL	EV: Effective date, if ot	her than the date of filing:	(OPTIONAL)	
(If an effe	ective date is listed, the	date must be specific and	t cannot be more than five business days prior to or 90 days after	
the date o		blook dogs not most the s	meliochlo statutom. Clima manipum et altitudate millional la listada a	
the docum	nent's effective date on	the Department of State's	pplicable statutory filing requirements, this date will not be listed as	
ine docum	nem 3 encenve date on	the Department of State s	s records.	
ARTICL	E VI: Other provisions, it	fany.		
				
<u></u>				
]	REOUIRED SIGNATI	JRE:		
•		ilon	1. Jan. Alex	
		trou	ly brincilles	
	Sig	gnature of a member or	andauthorized representative of a member.	
	This doc	ument is executed in acc	ordance with section 605.0203 (1) (b), Florida Statutes.	
	ı am awa	are man any taise informat les a third degree felony a	tion submitted in a document to the Department of State s provided for in s.817.155, F.S.	
		•	Holly Lowmiller	

The name and address of each person authorized to manage and control the Limited Liability Company:

. ARTICLE IV-

Page 2 of 2

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)