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APR 27 2016 S. GILBERT

## COVER LETTER

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TO:	Registration Section Division of Corporations
SIIRI	Risen Strength LLC
<b>БОВ</b>	Name of Limited Liability Company
The e	nclosed Articles of Organization and fee(s) are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
	David M Tate
	Name of Person
	Risen Strength LLC
	Firm/Company
	2027 NW 55th Street
	Address
	Gainesville, FL 32605
	City/State and Zip Code RisenStrength@gmail.com
	E-mail address: (to be used for future annual report notification)
For furt	her information concerning this matter, please call:
	David Tate 352 4946704
	Name of Person Area Code Daytime Telephone Number
Enclo	sed is a check for the following amount:
<b>]</b> \$125.	00 Filing Fee & S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certified Copy (additional copy is enclosed)

### **Mailing Address**

٠<u>ڋ</u>

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

The name of the Limited Lial	aility Campany ia				11 mg & 1
	only Company is.			16 APR 21	PM II.
Risen Strength LI	LC.			r <sub>ea</sub>	******
	end with the words "Limited L	iability Company	, "L.L.C.," or "LLC.")	The Clark Control of the Control of	1 600 2 2
ARTICLE II - Address:				•	1 1 1 1
	et address of the principal offic	ice of the Limited	Liability Company is:		
<u>Prin</u>	cipal Office Address:		Mailing Addre	<u>ss</u> :	
2027 NW 55th St		PO E	3OX 357627		
The Limited Liability Comp nother business entity with		Registered Agen egistered Agent. Y		vidual or	
ARTICLE III - Registered. The Limited Liability Computer business entity with	Agent, Registered Office, & any cannot serve as its own Re an active Florida registration.) eet address of the registered as David M. Tate	Registered Agen egistered Agent. Y ) gent are:	t's Signature:	vidual or	
ARTICLE III - Registered. The Limited Liability Computer business entity with	Agent, Registered Office, & any cannot serve as its own Re an active Florida registration.) eet address of the registered as David M. Tate	Registered Agen egistered Agent. Y	t's Signature:	vidual or	
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(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>'itle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MBR	David M Tate
	2027 NW 55th ST
	Gainesville, FL 32605
MBR	Sara E Tate
	2027 NW 55th ST
	Gainesville, FL 32605
<del></del>	
V: Effective date, if other than the citive date is listed, the date must be filing.)	date of filing: (OPTIONAL)  specific and cannot be more than five business days prior to or 90 or
ctive date is listed, the date must be filling.)  the date inserted in this block does nent's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not
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