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SECRETARY OF STATE
TALLAR ASSET, FLORIDA

16 APR 25 PH 3: 13

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COVER LETTER

	gistration Section vision of Corporations		
SUBJECT:	Brack Apparel, LLC.		
SCHIECT.	Name of Limited Liability Company		
The enclose	ed Articles of Organization and fee(s) are submitted for filing.		
Please retur	n all correspondence concerning this matter to the following:		
	Amanda D.Duncan		
	Name of Person	_	
	Brack Apparel , L.L.C	1	
	Firm/Company	_	
	5533 Woodcrest Dr.		17
	Address	-6	
	Milton, FL 32583	MPR 21	ر دی این تاریخ تاریخ
	City/State and Zip Code	- 21	())1 170 171
<u>.</u>	rackapparel@gmail.com E-mail address: (to be used for future annual report notification)	-# -3:	11.
		$\frac{\pi}{\omega}$	35
For further in	formation concerning this matter, please call:	ω)Á
	Amanda Duncan 251 610-1504		
-	Name of Person Area Code Daytime Telephone Number		
Enclosed is	a check for the following amount:		
]\$125.00 Fil			
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations		

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Brack Apparel, LLC (Must end	with the words "Limited	l Liability Company	, "L.L.C.," or "LLC.")	_
TICLE II - Address: mailing address and street a	address of the principal o	ffice of the Limited	Liability Company is:	
Princh	oal Office Address:		Mailing Address:	
5533 Woodcrest Dr.	5533 Woodcrest Dr. Milton, FL 32583		5533 Woodcrest Dr. Milton, FL 32583	
e Limited Liability Compan	y cannot serve as its own	Registered Agent.	it's Signature: You must designate an individual or	- - - -
e Limited Liability Compan ther business entity with an	y cannot serve as its own active Florida registration address of the registered	Registered Agent. 'on.)		16 APR 25
RTICLE III - Registered Age the Limited Liability Companiother business entity with an ename and the Florida street	y cannot serve as its own active Florida registration	Registered Agent. 'on.)		APR 2
ne Limited Liability Compan other business entity with an	y cannot serve as its own active Florida registration address of the registered	Registered Agent. \ n.) d agent are:		AFR 25
ne Limited Liability Compan other business entity with an	y cannot serve as its own active Florida registration address of the registered Amanda D. Duncan	Registered Agent. \ n.) I agent are: Name	You must designate an individual or	APR 25 PH
ne Limited Liability Compan other business entity with an	y cannot serve as its own active Florida registration address of the registered Amanda D. Duncan 5533 Woodcrest Dr.	Registered Agent. \ n.) I agent are: Name	You must designate an individual or	AFR 25 PH 3: 1

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..

Page 1 of 2

(CONTINUED)

Title:		Name and Address:
	thorized Member	
"MGR" = Man AMBR	rker	Antoinette Odom
RAIDIC		581 Shiloh Dr
		Pensacola, FL 32503
MGR		Amanda Duncan
	Accomplisation of the Control of the	5533 Woodcrest Dr
		Milton, FL 32583
		
Use attachmen	t if necessary)	
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Page 2 of 2