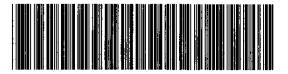
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	BIGG RIGG CCT:
	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Michael R Hendrix
	Name of Person
	BIGG RIGG
	Firm/Company
	9433 7th Avc
	Address
	Orlando, FL, 32824
	City/State and Zip Code mopar71mike@aol.com
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	Mike Hendrix 321 202-4112
	Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
] \$125.0	0 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301



FILED

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SED STARK OF STATE
ALL SEASON FLORIDA

April 20, 2016

MICHAEL R HENDRIX 9433 7TH AVENUE ORLANDO, FL 32824

SUBJECT: BIGG RIGG LLC Ref. Number: W16000029433

We have received your document for BIGG RIGG LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

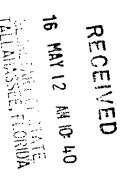
The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 016A00008220



ORISINAL

'ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		FILED
• • •		16 MAY 12 PH 2:
discribell e <i>The BIGG</i>	RIGG Band LLC ility Company, "L.L.C.," or "LLC.")	SECRETARY OF STA
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	一、在日本日本的工艺,自己的
ARTICLE II - Address: The mailing address and street address of the principal office of the principal office of the principal office Address:	of the Limited Liability Company is: Mailing Address:	
9433 7th Ave	9433 7th Ave	
Orlando, FL, 32824	Orlando, FL, 32824	
ARTICLE III - Registered Agent, Registered Office, & Re	gistered Agent's Signature:	

The name and the Florida street address of the registered agent are:

another business entity with an active Florida registration.)

Michael R Hendrix		
	Name	
9433 7th Ave		
Florida street addres	ss (P.O. Box NOT ac	cceptable)
Orlando, FL, 32824		
City	State	Zip

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..

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

Registered Agent's Signature (REOUIRED)

(CONTINUED)

Page 1 of 2

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Michael R Hendrix
WOK	9433 7th Ave
•	Orlando, FL, 32824
•	
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;	
• :	
*	
:	
(Use attachment if necessary)	
DW DOCAL JAN 10 MAN AND AND AND	e of filing: (OPTIONAL)
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