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i de la companya de l			
	questor's Name)		
	dress)		
(Address)			
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		

Office Use Only

MAY 18 2016 T. SCOTT



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SEGREJÁRY DE STATE DIVISION DE COURDINATIONS

COVER LETTER

	ration Section n of Corporations	
Sin SUBJECT:	mmchew, LLC	
SOBJECT.	Nam	e of Limited Liability Company
The enclosed Ar	ticles of Organization and f	ee(s) are submitted for filing.
Please return all	correspondence concerning	this matter to the following:
Ken	Minchew	
-		Name of Person
		Firm/Company
21 F	Blackwater Street	
		Address
San	a Rosa Beach, FL 32459	
kenm	inchew@gmail.com	City/State and Zip Code
	E-mail address: (to	be used for future annual report notification)
For further inform	ation concerning this matte	r, please call:
Ken	Minchew	404 9367720 at ()
-1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Name of Person	Area Code Daytime Telephone Number
Enclosed is a ch	eck for the following amoun	t:
\$125.00 Filing F	See \$130.00 Filing For Certificate of Sta	
	Mailing Address	Street Address

Mailing Address

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

ARTIC	HEI	- Nan	ne:

7.7

The name of the Limited Liability Company is:

Simmchew, LLC

(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:

Mailing Address:

21 Blackwater Street

Santa Rosa Beach, FL 32459

21 Blackwater Street

Santa Rosa Beach, FL 32459

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:

	- 4		
Ken	n.a	Inc	hau

Name

21 Blackwater Street

Florida street address (P.O. Box NOT acceptable)

Santa Rosa Beach

FL

32459

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 resistered agent as provided for in Chapter 605, F.S..

gent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Titi</u> "Al	<mark>le:</mark> MBR" = Authorized N	Леmber	Name and Address:		
"MGR" = Manager MGR			Ken Minchew		
			21 Blackwater Street		
			Santa Rosa Beach, FL 32459		
AN	иBR		Mike Simm		
			117 Kimball Drive		
			Lafayette, LA 70501		
<u> </u>					
				*	
ARTICLE V (If an effective the date of film Note: If the	ve date is listed, the d ling.) date inserted in this b	ner than the date of filing: late must be specific and	cannot be more than five busines	ss days prior to or 90 days after	
	T: Other provisions, if	•			
RE	<u>OUIRED</u> SIGNATU	URE:	<u> </u>		
	This doo I am awa	ument is executed in according that any false informat	an authorized representative of a produce with section 605.0203 (1) ion submitted in a document to the provided for in s.817.155, F.S.	(b), Florida Statutes.	
	к	en Minchew			

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)