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SECRETARY OF STATE

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COVER LETTER

Section 1

TO:	Registration Section Division of Corporations		
SUBJE	CCT: N69RR LLC Name of Lin	nited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this m	natter to the following:	
	Lionel Cartier	Name of Person	
	N69RR LLC	Firm/Company	
		rittivCompany	
	1118 YORKSHIRE ST,	Address	
	PORT CHARLOTTE, FL 33952	City/State and Zip Code	
<u>_W</u>	elder.cartier99@gmail.com E-mail address: (to be uso	d for future annual report notifica	tion)
For fur	ther information concerning this matter, ple	ase call:	
<u>Lionel</u>	Cartier at (Name of Person	519) 436 2783 Area Code Daytime Tel	ephone Number
_	ed is a check for the following amount: 00 Filing Fee \$\sum \\$ \$\sum \\$ \$\sum \\$ \$\sum \\$ \$\sum \\$ \$\text{Certificate of Status}\$	□\$155.00 Filing Fcc & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addi Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY. FILED

ARTICLE I - Name:	16 JUL 11 AM 6: 49
The name of the Limited Liability Company is:	SEGRETARY OF STATE TALLAHASSEE FLORIDA
N69RR LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1118 YORKSHIRE ST.	1118 YORKSHIRE ST.
PORT CHARLOTTE, FL 33952	PORT CHARLOTTE, FL 33952
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration.) The name and the Florida street address of the registered in the company cannot be a superior of the registered in the company cannot be a superior of the registered in the company cannot be a superior of the registered in the company cannot be a superior of the registered in the company cannot be a superior of the company	Registered Agent. You must designate an individual or n.)
Lionel Cartier	
Name	
1118 YORKSHIRE ST, Florida street address (P.O. Box	NOT acceptable)
PORT CHARLOTTE	FL 33952
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance igations of my position as registered agent as provided for in

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Chapter 605, F.S..

Page 1 of 2

<u> Fitle:</u>	Name and Address:	16 JUL II AP
'AMBR" = Authorized Member 'MGR" = Manager		
MGR — Manager	Lionel Cartier	SECRETARY OF TALLAHASSEE!
	1118 YORKSHIRE ST,	, , , , , , , , , , , , , , , , , , ,
	PORT CHARLOTTE, FL 3	3952
		
	-	
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	ate of filing:	(OPTIONAL)
EV: Effective date, if other than the d ctive date is listed, the date must be f filing.)		(OPTIONAL)
EV: Effective date, if other than the d ctive date is listed, the date must be filling.) EVI: Other provisions, if any.	ate of filing:specific and cannot be more than five bu	(OPTIONAL) siness days prior to or 90 o
E V: Effective date, if other than the dective date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	ate of filing:specific and cannot be more than five bu	(OPTIONAL) siness days prior to or 90 o
E V: Effective date, if other than the dective date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a	ate of filing: specific and cannot be more than five bu one Cartue member or an authorized representative	(OPTIONAL) siness days prior to or 90 o
E V: Effective date, if other than the dective date is listed, the date must be filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation u	ate of filing: specific and cannot be more than five bu conclusion Cartai member or an authorized representative 605.0203 (1) (b), Florida Statutes, the exender the penalties of perjury that the facts s	e of a member. cution of this document stated herein are true.
E V: Effective date, if other than the dective date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation u I am aware that any false in	ate of filing: specific and cannot be more than five bu one Cartue member or an authorized representative	e of a member. cution of this document stated herein are true.
E V: Effective date, if other than the dective date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation u I am aware that any false in	specific and cannot be more than five bu conclusion and cannot be more than five bu member or an authorized representative 605.0203 (1) (b), Florida Statutes, the exender the penalties of perjury that the facts s formation submitted in a document to the Elony as provided for in s.817.155, F.S.)	e of a member. cution of this document stated herein are true.

Wildson wa

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

N69RR LLC 1118 YORKSHIRE ST, PORT CHARLOTTE, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of N69RR LLC:

Lionel Cartier 1118 YORKSHIRE ST, PORT CHARLOTTE, FL 33952

Lionel Cartier, Organizer

July 6/2016