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(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

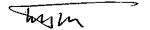
Office Use Only



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SECRETARY OF STATE
TALL////SSEE.TLORID



### **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJI	ECT: Innovative Direction LLC Name of Lir	nited Liability Company	<del></del>
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this m	atter to the following:	
	Alyssa Warren-Burtt	Name of Person	
	Innovative Direction LLC		
		Firm/Company	
			<b>5</b>
	-1621 East Jackson Street 112-	west Cervantes	<u>_</u>
		Address	
	AN THILL	Addiese	$\frac{1}{2}$
	•		ret Ti
	Pensacola, FL 32501		T III
		City/State and Zip Code	<u>:</u>
			= RP
<u>a</u>	kalyssy@gmail.com	d for future annual report notification)	<del>-</del> 5
	E-man address. (to be use	a for future annual report notification)	المبلا
For fur	ther information concerning this matter, ple	ase call:	
Alyss	a Warren-Burtt at (at (at (	850 583-1342  Area Code Daytime Telephone No.	
	Name of Person	Area Code Daytime Telephone Nu	moci
Enclos	ed is a check for the following amount:		
<b>5</b> 125.0	00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	00 Filing Fee, ficate of Status & fied Copy field copy is enclosed)
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Liability Company, "L.L.C.," or "LLC.")	
ffice of the Limited Liability Company is:	
Mailing Address:	
112 West Cervante:	2
162 FEast Jackson Street	
Pensacola, FL 32501	
& Registered Agent's Signature:	
Registered Agent. You must designate an individu	ual or
on.) `	
l agent are:	
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112 West Cervanted	
112 West Cervantes x NOT acceptable)	
x <u>NOT</u> acceptable)  FL 32501	
x NOT acceptable)	
x NOT acceptable)  FL 32501  Zip	v company at
X NOT acceptable)  FL 32501  Zip  ervice of process for the above stated limited liability	
X NOT acceptable)  FL 32501  Zip  ervice of process for the above stated limited liability of the appointment as registered agent and agree to	act in this
X NOT acceptable)  FL 32501  Zip  Ervice of process for the above stated limited liability of the appointment as registered agent and agree to of all statutes relating to the proper and complete p	act in this performance
X NOT acceptable)  FL 32501  Zip  Trvice of process for the above stated limited liability of the appointment as registered agent and agree to of all statutes relating to the proper and complete poligations of my position as registered agent as prov	act in this performance
X NOT acceptable)  FL 32501  Zip  Ervice of process for the above stated limited liability of the appointment as registered agent and agree to of all statutes relating to the proper and complete p	act in this performance
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EX NOT acceptable)  FL 32501  Zip  Trvice of process for the above stated limited liability of the appointment as registered agent and agree to of all statutes relating to the proper and complete poligations of my position as registered agent as provoter 605, F.S	act in this performance
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EXAMPLE ACCEPTABLE)  To provide of process for the above stated limited liability of the appointment as registered agent and agree to of all statutes relating to the proper and complete poligations of my position as registered agent as provider 605, F.S  Atture (REQUIRED)	act in this performance
FL 32501 Zip  revice of process for the above stated limited liability of the appointment as registered agent and agree to of all statutes relating to the proper and complete poligations of my position as registered agent as provoter 605, F.S	act in this performance
	Mailing Address:  162 East Jackson Street Pensacola, FL 32501  & Registered Agent's Signature: Registered Agent. You must designate an individual.)  agent are:

<u>litle:</u>	Name and Address:	
AMBR" = Authorized Member	<del></del>	
MGR" = Manager		
MGR	Alyssa Warren-Burtt	
	1621 East Jackson Street 112 West Ce	<b>XX</b>
	Pensacola, FL 32501	
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		•
		-
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### Innovative Direction LLC 1621 East Jackson Street Pensacola, FL

# **INITIAL LIST OF MEMBERS**

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

Alyssa Warren-Burtt 1621 East Jackson Street Pensacola, FL 32501

Alyssa Warren-Burtt, Organizer

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