

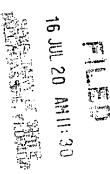
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Brandon Giles Consulting Name of Limited Liability Company	
Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Bandon Gills Name of Person	_
Bardon Giles Compiling	
765 Lynhaien Lane	
Address	
Auburndaic FL 33823	_
City/State and Zip Code	
brandon @ jushquestaunlation, urg	_
E-mail address (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	s &

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

ARTICLE I - Name: The name of the Limited Liability Company is:	
Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of	
Principal Office Address:	Mailing Address:
765 Lynhauen Lare Aubundale, FL 33923	765 Lynhauen Lano Moundale, FL 3382-3
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Registanother business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent	Foundation, Inc.
Florida street address (P.O	
Auburndak	FL 33V2-3 State Zip
Having been named as registered agent and to accept service of polace designated in this certificate, I hereby accept the appointme further agree to comply with the provisions of all statutes relating arm familiar with and accept the obligations of my position as reg	ent as registered agent and agree to act in this capacity. It to the proper and complete performance of my duties, and I istered agent as provided for in Chapter 605, F.S
Registered A	agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

16 JUL 20 AMII: 30

<u>ïtle:</u> ANGRE — Authorizad	Name and Address:
AMBR" = Authorized MGR" = Manager	Member
MGR	Brandon Giles
	765 Lynniwa Lone
	Arburndule, FL 33423
AMRK	Curtney Giles
,,.	765 Lynhaven Lane
	Admiradale Fr 38823
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V: Effective date, if o	her than the date of filing:
tive date is listed, the filling.) ne date inserted in this ent's effective date on	her than the date of filing: (OPTIONAL) date must be specific and cannot be more than five business days prior to or 90 or block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.
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V: Effective date, if of tive date is listed, the filing.) ne date inserted in this ent's effective date on VI: Other provisions, in EOUIRED SIGNAT	ther than the date of filing:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)