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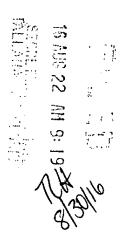
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: <u>TJB Positively Low Online Enterp</u> Name of Lir	orises LLC mited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this re	natter to the following:	
	Todd J Biondolillo	N. CD	
		Name of Person	
		Firm/Company	Andrew and the state of the sta
	7295 60th St apt #3	Address	
	Pinellas Park, FL 33781	City/State and Zip Code	
<u>tb</u>	ondo2016@gmail.com E-mail address: (to be uso	ed for future annual report notifica	ution)
For fu	ther information concerning this matter, ple	ease call:	
Todd	J Biondolillo at (at (727) 549-0171 Area Code Daytime Tel	lephone Number
Enclos	ed is a check for the following amount:		
□ \$125.0	00 Filing Fee	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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 Adds Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions ter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
TJB Positively Low Online Enterprises LLC	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7295 60th St apt #3	_7295 60th St apt #3
Pinellas Park, FL 33781	Pinellas Park, FL 33781
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an individual or)
The name and the Florida street address of the registered a	gent are:
Todd J Biondolillo	
Name	
7295 60th St apt #3 Florida street address (P.O. Box I	NOT acceptable)
Pinellas Park	FL 33781
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obli	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r 605, F.S
The Brown	Ole
Registered Agent's Signatu	
(CONTINUE Page 1 of 2	(A)

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Todd J Biondolillo
	7295 60th St apt #3
	Pinellas Park, FL 33781
and the state of t	
(Use attachment if necessary)	
effective date is listed, the date must be spe	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than the date	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than the date effective date is listed, the date must be spette of filing.)	ecific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than the date effective date is listed, the date must be specific of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than the date effective date is listed, the date must be specific of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than the date effective date is listed, the date must be specific of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60)	inber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document
CLE V: Effective date, if other than the date effective date is listed, the date must be specified of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under the constitutes an affirmation under the constitutes an affirmation under the constitutes are section 60.	ecific and cannot be more than five business days prior to or 90 days The prior of an authorized representative of a member. 15.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.
CLE V: Effective date, if other than the date effective date is listed, the date must be specified of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false information of the constitutes are affirmation.	inber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State
CLE V: Effective date, if other than the date effective date is listed, the date must be spette of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false information of the constitutes are affirmation under I am aware that any false information under I am aware that a large I am a	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.

 $\frac{Filing\ Fces:}{\text{\$125.00 Filing Fee}\ for\ Articles\ of\ Organization\ and\ Designation\ of\ Registered\ Agent}$ \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)