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## COVER LETTER

TO: Registration Section  Division of Corporations
SUBJECT: Part to Letter 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:
Name of Person
Poemboo Lotles Son UC Firm/Company
22281 Fourtain Lakes BL #323
Estero FL 33928  City/State and Zip Code  dvegalmt @ aol.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Deruse Vega at (941) 444-1365  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 Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## · ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam
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The name of the Limited Liability Company is:

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:
18070 S. Tamiami Ts;	18070 S. Tamiami Tr
Sutc3	Suite 3
FORFMYERS, FL 33408	FORK MYERS, I-L 33900

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:

Name

Harrie Hampton

Name

HILL 116 Street SW

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

Letter Acros FL 32976

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 middlines, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Denise Vega 22281 Fountain Lakes BL + Estero, FL 34135
AMBR	Laurie Hampton 4114 164 3treet SW Lehyh Acres FL 33976
<u></u>	
(Use attachment if necessary)	
•	at of State's records.
•	at of State's records.
•	at of State's records.
REQUIRED SIGNATURE:  Signature of a m  This document is exect I am aware that any fall constitutes a third degr	nember or an authorized representative of a member. The state of a member of the section 605.0203 (1) (b), Florida Statutes, the information submitted in a document to the Department of State free felony as provided for in s.817.155. F.S.
Signature of a m This document is exec I am aware that any fal constitutes a third degr	nember or an authorized representative of a member. Ented in accordance with section 605.0203 (1) (b), Florida Statutes. Else information submitted in a document to the Department of State
REQUIRED SIGNATURE:  Signature of a m This document is exec I am aware that any fal constitutes a third degr	nember or an authorized representative of a member.  nuted in accordance with section 605.0203 (1) (b), Florida Statutes, like information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.  Typed or printed name of signee  Filing Fees:  Organization and Designation of Registered Agent

The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-