11600/80684

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| | egistration Section ivision of Corporations | | | | |
|---------------|---|---|-------------------|--|--|
| SUBJECT | MOJO METALWORKS LLC | | | | |
| SUBJECT | Name of Limited Liability Company | | | | |
| The enclos | ed Articles of Organization and fee | (s) are submitted for filing. | | | |
| Please retu | rn all correspondence concerning t | nis matter to the following: | | | |
| | Matthew Maher | | | | |
| | | Name of Person | | | |
| | | | | | |
| | | Firm/Company | | | |
| | 5230 N Lake Burkett Lane | | | | |
| | | Address | ਛੋ | | |
| | Winter Park FL 32792 | | (7) (7) (7) | | |
| | mattjm21@gmail.com | City/State and Zip Code | D.) | | |
| | | used for future annual report notification) | | | |
| For further i | nformation concerning this matter, | please call: | 2:43 | | |
| | Matthew Maher | 407 923-5624 at () | حث | | |
| | Name of Person | Area Code Daytime Telephone Number | | | |
| Enclosed i | s a check for the following amount | | | | |
| \$125.00 F | - | & \$155.00 Filing Fee & \$160.00 Filing Fee & Certificate of Certificate of Certificate of Certified Copy (additional copy is enclosed) | of Status & | | |
| | Mailing Address New Filing Section Division of Corporations P.O. Box 6327 | Street Address New Filing Section Division of Corporations Clifton Building | • | | |
| | Tallahassee, FL 32314 | 2661 Executive Center Circle | | | |

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | LWORKS LLC | | | |
|--|--|--|---|----------------|
| (Mu | st end with the words "Limited L | iability Company | , "L.L.C.," or "LLC.") | |
| ARTICLE II - Address: The mailing address and s | treet address of the principal offi | ice of the Limited | Liability Company is: | |
| <u>P</u> | rincipal Office Address: | | Mailing Address: | |
| 5230 N Lake | Burkett Lane | 5230 | N Lake Burkett Lane | |
| | | | | |
| Winter Park F | L 32792 | Win | ter Park FL 32792 | |
| Winter Park F ARTICLE III - Register The Limited Liability Co | L 32792 ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration. | Registered Ager | nt's Signature: | ıal or |
| Winter Park F ARTICLE III - Register The Limited Liability Co another business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R | Registered Agert (egistered Agent. ' | nt's Signature: | o n |
| Winter Park F ARTICLE III - Register The Limited Liability Coanother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration. street address of the registered a Matthew Maher | Registered Agert (egistered Agent. ' | nt's Signature: | 16 SE? |
| Winter Park F ARTICLE III - Register The Limited Liability Coanother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration. street address of the registered a Matthew Maher | Registered Agert (Registered Agent (Registered A | nt's Signature: | o n |
| Winter Park F ARTICLE III - Register The Limited Liability Coanother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration. street address of the registered a Matthew Maher | Registered Ager Legistered Agent. ') agent are: Name | nt's Signature: You must designate an individu | 16 SE? |
| Winter Park F ARTICLE III - Register The Limited Liability Coanother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration. street address of the registered a Matthew Maher 5230 N Lake Burkett L | Registered Ager Legistered Agent. ') agent are: Name | nt's Signature: You must designate an individu | 16 SE? |

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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

Page 1 of 2

| Title: | | Name and Address: | | |
|--|---|--|--|--|
| "AMBR" = Autho | rized Member | | | |
| "MGR" = Manage | r | | | |
| MGR | | Matthew Maher | | |
| | | 5230 N Lake Burkett Lane | | |
| | | Winter Park FL 32792 | | |
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| EV: Effective dat ective date is listed of filing.) | e, if other than the date of fi | ling: 09/22/2016 (OPTIONAL) c and cannot be more than five business days prior to or 90 | | |
| fective date is listed of filing.) f the date inserted i ment's effective da | e, if other than the date of fi I, the date must be specific In this block does not meet the on the Department of Si | c and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will no | | |
| LE V: Effective dat fective date is listed of filing.) f the date inserted inment's effective date | e, if other than the date of find, the date must be specificant this block does not meet the on the Department of Scients, if any. | the applicable statutory filing requirements, this date will notate's records. | | |
| LE V: Effective dat fective date is listed of filing.) If the date inserted i ument's effective da LE VI: Other provis | e, if other than the date of find, the date must be specified in this block does not meet ate on the Department of Scients, if any. NATURE: Signature of a membral is document is executed in a ware that any false info | c and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will no | | |
| LE V: Effective dat fective date is lister of filing.) f the date inserted i ment's effective da LE VI: Other provis | e, if other than the date of fit, the date must be specific in this block does not meet ate on the Department of Scients, if any. NATURE: Signature of a membrais document is executed in aware that any false infonstitutes a third degree felometric interest in the date of fit in the | the applicable statutory filing requirements, this date will notate's records. The ror an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes. Tormation submitted in a document to the Department of State | | |

as

ARTICLE IV-

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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