L16000196059

(Requestor's Name)
(Address)
(Address)
(riduless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(=,
(December 1)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filling Officer.





300291363943

10/24/16--01011--002 **125.00

onte OCT 24 PM 2: 15

EFFECTIVE DATE 10/25/16

10/26/16

COVER LETTER

Division of Corporations
SUBJECT: AVIIX MINER LLC 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:
CATHLENE Miner
Name of Person
AVIIX MINEN LLC Firm/Company
,
225 Atlantis Cucle # 204 A
Address
ST. Augustre, FL 32-080 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Miner at (336) 391-1367
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy
(additional copy is enclosed
Mailing Address New Filing Section Street Address New Filing Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

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:
Ariix Miner LLC
(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:
ST. Augustus, FC 32080
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:
CATHLERE Miner Name 225 Atlantis Circle # 204A Florida street address (P.O. Box NOT acceptable) 57 Augst, FL 32080 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 my duties, 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

TALL STATES OF THE STATES OF T

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	CATHLONG Miver
"AMBR"	225 Atlantis Circle # 204
	- 57. Augusty 12 3208
אטויוא	2.25 Atlanto Circlett 204.
	ST Augustur, FL 30080
(Use attachment if necessary)	
ICLE V: Effective date, if other than the date	of filing: 10 25 20 (6 (OPTIONAL)
n effective date is listed, the date must be sp late of filing.)	ecific and cannot be more than five business days prior to or 90 days at
e: If the date inserted in this block does not i	meet the applicable statutory filing requirements, this date will not be liste
document's effective date on the Department	of State's records.
DECEMBER OF STREET	\sim
FICLE VI: Other provisions, if any.	

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

CATHLene M Typed or printed name of signee

Filing Fees:

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

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

Page 2 of 2