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Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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COYER LETTER

TO: Registration Section Division of Corporations	,·
SUBJECT: All Goods Exchange 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:	•
Earl L Cole III Name of Person	
Firm/Company 603 Follon Rd Apt A2 Tallahassee FC 323, Address	12
City/State and Zip Code Cor (Co) e 3 d mail - Com mail audiessi: (to be used for future annual report notification)	
For further information concerning this matter, please call: Car L Co/E at (248) 520-0270 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 \$\$\$\$\$\$Certificate of Status \$\$\$\$\$(additional copy is enclosed)	
Mailing Address Street Address	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 323 14

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

	Sagds Excl Must end with the words "Limi	ted Lizbility Compa	ny, "L.L.C.," or "LLC.")	,		
ARTICLE II - Addre The mailing address a	ess: and street address of the principa	al office of the Limit	ed Liability Company is:		·	
	Principal Office Address:		Mailing Ado	dress:		
603Fc	Hon Rd Apt A:	2		· ·	•	
TE11a	hosses FT 3	23/2 _		 .		
ARTICLE III Dagie	stand A mark David and A OSE					ੂ ਨੂੰ ਜ
The Limited Liability	tered Agent, Registered Offic Company cannot serve as its o	wn Registered Agen	gent's Signature: t. You must designate an i	ndividual or		<u> </u>
another business anti-						
, .	y with an active Florida registra	* .	• •			
, .	y with an active Florida registratida street address of the registe	* .				山田
, .		ered agent are: Co/∈	<u>III</u>		-02	日 日 日
, .	ida street address of the registe	ered agent are: Co/∈ Name	1.1.1.		1000 - 000 A	-7 FK 3: 27
, .	rida street address of the register $\frac{\mathcal{E}_{a-1}}{603 \text{Fe/s}}$	ered agent are: Col∈ Name Fon Rd L	III 101 A2		1000 - 10	-7 FK 3: 27
, .	ida street address of the register $\frac{\text{Ca-l}}{\text{Florida street add}}$	ered agent are: Co/∈ Name Hon Rd dress (P.O. Box NO)	10+ A2 Vacceptable)		- (OND)	-7 -PK 3: 27
, .	ida street address of the register $\frac{\text{Ca-l}}{\text{CO3 Fulz}}$ Florida street add	ered agent are: Co/∈ Name Hon Rd dress (P.O. Box NO)	32312		1000 - COID	-7 -PH 3: 27
The name and the Flo	ida street address of the register $\frac{\text{Ca-l}}{\text{Florida street add}}$	ered agent are: Col€ Name Fon Rd dress (P.O. Box NO) State	32312 Zip			7 PH 3: 27

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

The name and address of each person authorized	to manage and control the Limited Liability Company:
Title:	Name and Address:
"AMBR" = Authorized Member	0 - 1
. "MGR" ≒ Manager	Earl L Cole Til.
	CO3 Fulton Rd And A)
	Tellahassec FL 32312
AMRR	Emanual Tones
AMBR	190 Dave Large
<u> </u>	Montice/10 FC, 323411
AMRR	
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(Use attachment if necessary)	
the date of filing.)	and cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
	<u>\$60</u>
	<u>3</u>
REQUIRED SIGNATURE:	175% 1
RECORDED SIGNATURE:	• •
	38.
Signature of a member	or an authorized representative of a member.
I his document is executed in a	accordance with section 605.0203 (1) (b), Florida Statutes, the nation submitted in a document to the Department of StateJr
	y as provided for in s.817.155, F.S.
	OI COCO TIT
Тур	ed or printed name of signee
•	
	Riling Rees

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)