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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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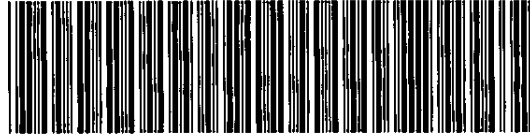
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HEMP LIFE REMEDIES, LLC
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:

R. STEVEN RUTA, ESQUIRE

Name of Person

BARRETT, CHAPMAN & RUTA, PA

Firm/Company

18 WALL STREET

Address

ORLANDO, FLORIDA 32801

City/State and Zip Code

james@bcrlaw.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

R. STEVEN RUTA

407

839-6227

at ()

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



\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

ARTICLES OF ORGANIZATION

OF

HEMP LIFE REMEDIES, LLC.

The undersigned, acting as a manager and authorized representative of the limited liability company under the Florida Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company:

ARTICLE I

NAME

The name of this limited liability company is Hemp Life Remedies, LLC

ARTICLE II

PRINCIPAL OFFICE/MAILING ADDRESS

The principal office and mailing address of the limited liability company is: 618 Arvern Drive, Altamonte Springs, FL. 32701.

ARTICLE III

INITIAL REGISTERED OFFICE AND AGENT

The name and street of the initial Registered Agent and office of this limited liability company is R. Steven Ruta, 18 Wall Street, Orlando, Florida 32801.

ARTICLE IV

MANAGEMENT; INITIAL MANAGERS

The limited liability company shall be a manger managed company. The name and address of the initial manager is:

Title:

Name and Address:

MGR

Michael Zielinski
618 Arvern Drive
Altamonte Springs, FL. 32701

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CLERK OF CIRCUIT
JAIL
TALLAHASSEE FLORIDA

ARTICLE V

EFFECTIVE DATE

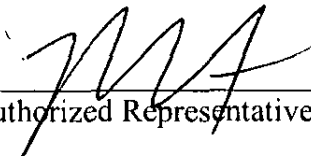
Pursuant to Fla. Stat. §605.0207, the effective date of the limited liability company existence is five (5) days prior to the filing of these Articles of Organization with the State of Florida.

ARTICLE VI

PURPOSE

The purpose of the limited liability company is to engage in any activities or business permitted under the laws of the United States and Florida.

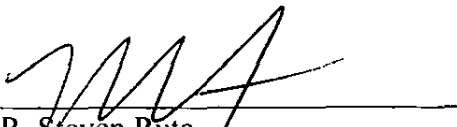
IN WITNESS WHEREOF, by the undersigned member or authorized representative of member has executed these Articles of Organization this 2nd day of November, 2016.



Authorized Representative

STATEMENT OF REGISTERED AGENT

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 obligation of my position as registered agent as provided for in Chapter 605, Florida Statutes.



R. Steven Ruta
Registered Agent

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SECRETARY OF STATE
TALLAHASSEE FLORIDA