

L16000214682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

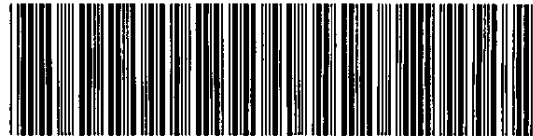
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/07/16--01020--020 **125.00

16 NOV 29 PM 2:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA

11/29/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 10, 2016

ALYSIA MACKARVICH
28741 SOUTH CARGO COURT, UNIT #1
BONITA SPRINGS, FL 34135

SUBJECT: SEVEN, ONE, THREE, LLC
Ref. Number: W16000076362

RECEIVED
16 NOV 29 PM 12:29
CORPORATIONS
DIVISION

We have received your document for SEVEN, ONE, THREE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist II

Letter Number: 616A00024194

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Seven, One, Three, 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:

28741 South Cargo Court, Unit #1
Bonita Springs, FL 34135

28741 South Cargo Court, Unit #1
Bonita Springs, FL 34135

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:

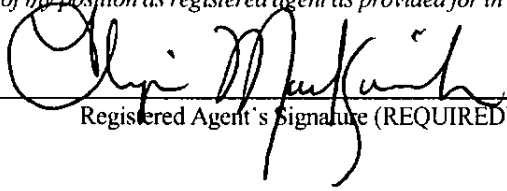
Alysia MacKarvich
Name

28741 South Cargo Court, Unit #1
Florida street address (P.O. Box **NOT** acceptable)

Bonita Springs FL 34135
City State Zip

16 NOV 29 PM 2:57
SEAL OF THE STATE
TALLAHASSEE FLORIDA

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)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Alysia MacKarvich

28741 SOutH Cargo Court, Unit #1

Bonita Springs, FL 34135

(Use attachment if necessary)

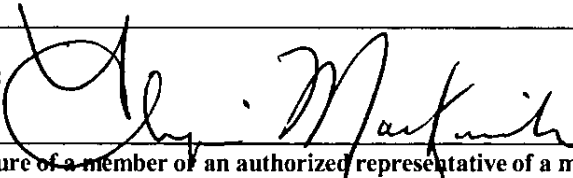
ARTICLE V: Effective date, if other than the date of filing: 10-26-2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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

This document is executed in accordance with section 609.0203 (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.

ALYSIA MACKARVICH

Typed or printed name of signee

STATE DEPARTMENT OF STATE
TALLAHASSEE FLORIDA
16 NOV 29 PM 2:57

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)