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Special Instructions to	Filing Officer:	
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Office Use Only



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SECRITARY OF PIREDA

M. MOON DEC 15 2016

COVERLETTER TO: Registration Section **Division of Corporations** The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/Company ohosco@amail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Mailing Address

Enclosed is a check for the following amount:

\$125.00 Filing Fee

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

\$130.00 Filing Fee &

Certificate of Status

Street Address

\$155.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

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

\$160.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLET - Name: The name of the Limited Liability Company is:	
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: 601 Balsam Apple Dr Venice RL 34293 P.O. Box 1130 Venice RL 34294	 -
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: Vince LoBosco Name 601 Balsam Apple Drive Florida street address (P.O. Box Not acceptable)	
Venice FL 34293 City State Zip	
Taving been named as registered agent and to accept service of process for the above stated limited liability company place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacitather agree to comply with the provisions of all statutes relating to the proper and complete performance of my dution as registered agent as provided for in Chapter 605, F.S	city. I
Registered Agent's Signature (REQUIRED)	\$EC:20 1.5 16 DEC 1.5
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) e inserted in this block does not meet the ap iffective date on the Department of State's ther provisions, if any.	oplicable statutory filing requirements, this date will not be records
I <u>RED</u> SIGNATURE:	
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Signature of a member or a	an authorized representative of a member. ordance with section 605.0203 (1) (b), Florida Statutes.
I his document is executed in account in a second an aware that any false informatic constitutes a third degree felony as	s provided for in s.817.155, F.S.
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ARTICLE IV-