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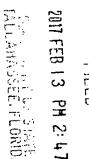
(Requestor's Name)	—	
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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V HERRING FEB 14 2017

COVER LETTER

ь,

TO: Registration Section Division of Corporations SUBJECT: 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: Squid Survey Name of Person Firm/Company Address
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Savied Sweenly at (225) 628 1100 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S155.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee. Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing Address Street Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
2017 FEB 13 PM 2: 47
TALLAHASSEE, FLORIDA

ARTICLE I - 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:

Mailing Address:

STANDA COVE

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:

Florida street address (P.O. Box NOT acceptable)

Just Fl 3499/

State

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.,

(CONTINUED)

fed Agent's Signature (REQUIREL

Page 1 of 2

FILEO

ARTICLE IV- The name and address of each person autl	norized to manage and control the Limited LEEDty &mpmy:2: 47
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address: TALL ANASSEE, FLORIDA
MGR	Sturt F/ 34997
(Use attachment if necessary)	
an effective date is listed, the date must be spece e date of filing.)	of filing:
RTICLE VI: Other provisions, if any.	
,	
REQUIRED SIGNATURE	Bang
This document is execute I am aware that any false	nber or an authorized representative of a member. d in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
<u>.0-1019</u>	Typed or printed name of signer
	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)