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## COVER LETTER

	gistration Section vision of Corporations	
SUBJECT	*****	arl on 30A LLC
SUBJECT		mited Liability Company
The enclose	ed Articles of Organization and fee(s) a	re submitted for filing.
Please retur	n all correspondence concerning this m	atter to the following:
		Steve Newton
		Name of Person
		Firm/Company
		10718 Greenfield Road
		Address
	Sod	ly Daisy, Tennessee 37379
	Stevenewton2012@gmail.com	City/State and Zip Code
-		for future annual report notification)
For further is	dormation concerning this matter, pleas	se call:
	Steve Newton 4	23 593-3160
		Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:	
<b>]\$</b> 125.00 Fi	ling Fee \$\int \\$130.00 \text{ Filing Fee & Certificate of Status}	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) 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  2664 Executive Center Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Blue Pearl on 30			<u> </u>
(Must cor	ntain the words "Limited I	Liability Company, "	"L.L.C" or "LLC."	)
ARTICLE II - Address: The mailing address and street	address of the principal o	ffice of the Limited I	Liability Company i	s:
<u>Princi</u>	pal Office Address:		Mailing &	<u>Address</u> :
10718 Greenfield R	toad	Same		
Soddy Daisy, TN 3				
The name and the Florida stree	Corporation Service	_	<u></u>	_
	Corporation Service			<del>_</del>
	1201 Hays Street	<del></del>	<del>,</del>	_
	Florida street addres	s (P.O. Box <u>NOT</u> ac	ceptable)	
	Tallahassee	FL	32301	
	City	State	Zip	
lace designated in this certificat wither agree to comply with the p	e. I hereby accept the app provisions of all statutes re obligations of my position Corporation Serv By:	nointment as registere, elating to the proper a as registered agent a fice Company	d agent and agree to and complete perfor is provided for in Ch	o act in this capacity. It is mance of my duties, and I apter,605, F.S  Harry B. Davis
laving been named as registered clace designated in this certificat farther agree to comply with the p im familiar with and accept the d	e. I hereby accept the app provisions of all statutes re obligations of my position Corporation Serv By:	ointment as registere elating to the proper o as registered agent a	d agent and agree to and complete perfor is provided for in Ch	o act in this capacity. I mance of my duties, and I apter 605, F.S.

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<u>`itle:</u>		Name and Address:
$\overline{AMBR}$ " = $A\iota$	thorized Member	
MGR" = Mar	ager	
AMBR		Steve Newton
-		10718 Greefield Road
		Soddy Daisy, TN 37379
V: Effective ctive date is li f filing.)	sted, the date must be speci	filing: (OPTIONAL) fic and cannot be more than five business days prior to or 90 (
IV: Effective etive date is li f filing.) he date insert ient's effectiv	date, if other than the date of sted, the date must be specif	fic and cannot be more than five business days prior to or 90 or the applicable statutory tiling requirements, this date will not
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ARTICLE IV-