## L17000191285

(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



800303148608

09/05/17--01014--012 \*\*160.00

17 SEP -5 GHID: OF

T 9/14/17

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Office, PLLC	
(Must contain	the words "Limited Liab	lity Company, "L.L.C.," or "LI.C.")
CLE II - Address:		
iling address and street add	ress of the principal office	of the Limited Liability Company is:
<u>Principal</u>	Office Address:	Mailing Addres
201 E. Government Street		2172 W. Nine Mile Rd #190
Pensacola, FL 32502		D
CLE III - Registered Agen	innot serve as its own Reg	egistered Agent's Signature: istered Agent. You must designate an indiv
LE III - Registered Agen mited Liability Company co	annot serve as its own Reg ive Florida registration.)	egistered Agent's Signature: istered Agent. You must designate an indiv
CLE III - Registered Agen mited Liability Company co business entity with an act	annot serve as its own Reg ive Florida registration.)	egistered Agent's Signature: istered Agent. You must designate an indiv
CLE III - Registered Agen mited Liability Company co business entity with an act	annot serve as its own Regive Florida registration.)  dress of the registered age	egistered Agent's Signature: istered Agent, You must designate an indiv nt are:
CLE III - Registered Agen mited Liability Company co business entity with an act	annot serve as its own Regive Florida registration.)  dress of the registered age  Brenda E. Carpenter	egistered Agent's Signature: istered Agent. You must designate an indiv nt are:
CLE III - Registered Agen mited Liability Company co business entity with an act	annot serve as its own Regive Florida registration.)  dress of the registered age  Brenda E. Carpenter  No	egistered Agent's Signature: istered Agent. You must designate an indiv nt are:
CLE III - Registered Agen mited Liability Company co business entity with an act	annot serve as its own Regive Florida registration.)  dress of the registered age  Brenda E. Carpenter  Na  201 E. Government Stree	egistered Agent's Signature: istered Agent. You must designate an indiv nt are:

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)

7 SEP -5 AMINOUL

## Title: "AMBR" = Authorized Member "MGR" = Manager AMBR Brenda E. Carpenter 2172 W. Nine Mile Rd #190 Pensacola, FL 32534 (Use attachment if necessary)

ARTICLE VI: Other provisions, if any.

Law Office

(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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as

REQUIRED SIGNATURE:

the date of filing.)

ARTICLE V: Effective date, if other than the date of filing:

the document's effective date on the Department of State's records.

ARTICLE IV-

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

This document is executed in accordance with section 605.0203 (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.

Carpenter

Brenda E. Carpenter

Typed or printed name of signee

## 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)

17 SEP -5 AN IU: UI

\_ , (OPTIONAL)