L17000 206639

(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 Filling Officer:	

Office Use Only



800303241098

10/09/17--01001--005 **125.00

COVER LETTER

SUBJECT: Raftable LLC 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: Toshua J. Blanchard	
Please return all correspondence concerning this matter to the following:	
Joshua J. Blanchard	
Name of Person	
Firm/Company	
52 Waynel Circle	
Fort Waton Beach FL 32548 City/State and Zip Code	
beezufish@amail.com	
E-mail addresss to be used for future annual report notification)	
For further information concerning this matter, please call:	
Joshua Blanchard at (850) 4910-2814 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee Certificate of Status Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & 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
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Raftable LC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

The mailing address and street address of the principal office of the Limited Liability Company is:

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

FILED

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Principal Office Address:	Mailing Address:
52 Waynel Circle Fort Marton Broch FL 3254	8 Fort natton Beach FL 32548
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Register another business entity with an article "bridg registration.)	
The name and the Florida street andress of the registered agent a	re:
Joshua J Name	Blanchard
52 Wayr Wardan weer address (P.B. 1	
Fort Walton Be	each FL 32548 Late Zip
Having been named as registered agent and to accept service of proplace designated in this certificate. Thereby accept the appointment further agree to comply with the provisions of all statutes relating to am familiar with and accept the course dismost may position as regist	t as registered agent and agree to act in this capacity. I o the proper and complete performance of my duties, and I
Registered Age	ent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorizes	3 Member	Name and Address:	
"MGR" = Manager		JOSHUA BLANCHARD	
	•	52 WAYNEL CR	
		FORT WALTON BEACH, FL 32548	
AMBR			
	_		
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	•		
(Use attachment if need	essarv)		
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The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-

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