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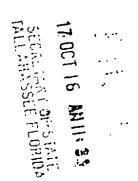
(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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(Dx	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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COVER LETTER

	New Filing Section Division of Corporations
SUBJEC	Built For More LLC
	Name of Limited Liability Company
The encl	osed Articles of Organization and fee(s) are submitted for filing.
lease re	turn all correspondence concerning this matter to the following:
	BennettLeeBalcer
	Name of Person
	Built For More LLC
	Firm/Company
	9703W SampleRd
	Address
	CoralSprings,FL 33065
	City/State and Zip Code builtformore.training@gmail.com
	E-mail address: (to be used for future annual report notification)
or furthe	r information concerning this matter, please call:
	BennettLeeBalcer 754 3686833
	Name of Person Area Code Daytime Telephone Number
anclosed	is a check for the following amount:
\$125.00	Filing Fee S130.00 Filing Fee & Certificate of Status S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 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

Built For More LLC	
(Must contain the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
	e of the Limited Liability Company is:
Fineinal Office Address:	
	Mailing Address
ing address and street address of the principal office	

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:

BennettLee Balcer		
	Name	
2020NE 56th St Apt.	2108	
Florida street address	(P.O. Box <u>NOT</u> ac	eceptable)
Fort Lauderdale	FL	33308
City	State	Zip

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)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
OWNER / mgr	BennettLeeBalcer
- 	2020NE 56th Apt. 110
	Fort LauderdaleFL 33308
(Use attachment if necessary)	
LEV: Effective date if other than the date of filit	ng: (OPTIONAL)
ffective date is listed, the date must be specific :	and cannot be more than five business days prior to or 90 days a
e of filing.)	
	e applicable statutory filing requirements, this date will not be liste
ument's effective date on the Department of Stat	le's records.
LE VI: Other provisions, if any.	

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.

BennettLeeBalcer

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)