## L18000060013

(Requestor's Name)			
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PICK-UP WAIT MAIL			
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## **COVER LETTER**

New Filing Section
Division of Corporations

TO:

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:
Frank Joseph Riley Sr. Name of Person
Original TAXI - "LLC."
1423 N. 48 the.
Pensacola, FL. 32506 City/State and Zip Code
Frank viley 13453 9 mail. Low E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person . Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Original AXE - "LLC."
(Must contain 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:
1423 N. 4844 ve.	1423 N. 48 Para.
Pensacola, FL. 32506	Pensacola, FL. 32506

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:

Name

Name

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

Pensacola Florida Street Address (P.O. Box NOT acceptable)

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 Signatore (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
Frank Rilay So	Original TAR (-LLC?) Pensacola, Fh. 32506		
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(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing	. (OPTIONAL)		
(If an effective date is listed, the date must be specific an the date of filing.)	ad cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as		
ARTICLE VI: Other provisions, if any.	-1		
This document is executed in ac I am aware that any false informations constitutes a third degree felony	an authorized representative of a member. Scordance with section 605.0203 (1) (b), Florida Statutes. at provided for in s.817.155, F.S.		
Frank Jos:	d or printed name of signee		

The name and address of each person authorized to manage and control the Limited Liability Company:

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)

ARTICLE IV-