

899070668
L180000817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

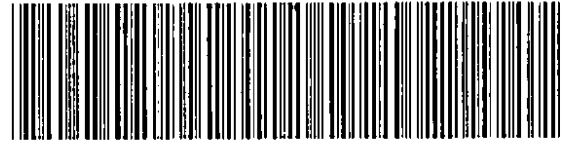
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

M MOON

MAR 21 2018



600310853476

03/21/18--01010--006 **155.00

2018 MAR 21 AM 11:01

18 MAR 21 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 3/21

- ☒ CERTIFIED COPY _____
☐ PHOTOCOPY _____
☐ CUS _____
☒ FILING LLC _____

1. map expert LLC
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

FILED
18 MAR 21 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**SPECIAL
INSTRUCTIONS:**

**Articles of Organization
For
MAP EXPERT LLC**

Florida Limited Liability Company

ARTICLE I - Name:

The name of the Limited Liability Company is MAP EXPERT LLC

ARTICLE II - Address:

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

1553 SW 5 ST Apt 107
Homestead, FL 33030

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Thomas Williams
1553 SW 5 ST Apt 107
Homestead, FL 33030

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.

Thomas Williams

Thomas Williams, Registered Agent

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Thomas Williams
1553 SW 5 ST Apt 107
Homestead, FL 33030

Carri Brown
Carri Brown, Organizer

FILED
18 MAR 21 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA