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Certified Copies	_ Certificates	s of Status
Special instructions to	Filing Officer:	
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## COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Sex QM Mame of Lim	ary LLC ited Hability Company	
The enclosed Articles of Organization and fee(s) are	e submitted for filing.	
' Please return all correspondence concerning this ma	atter to the following:	No. 19 State States 1 No.
Jeremy Mas	Name of Person	
	$\sim$ 1 $\wedge$	
125 Maria	De Carmen	
Masseyland	invState and Zip Code  Comparison  I for future annual report notification)	
For further information concerning this matter, pleas	se call:	
Dev 9m Massey at (	Area Code Daytime Telephone Number	्या । अध्य ध्यान । १
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{Certificate of Status}	\$155.00 Filing Fee & Certificate Of Status & Certifica	d)
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

Tallahassee, FL 32314

अध्य जन्म । प्र

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

(Must contain) he 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:
125 Maria Del Carmen	125 Maria Del Carmen
ranfordville FL 32327	

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:

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

1 501 Factullo El 3030

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)

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ARTICLE IV- The name and address of each person	authorized to manage and control the Limited Liability Company:
Title: "AMBR" = Authorized Member "MGR" = Manager	Seveny Massey 125 Maria Del
MGR	CravFordville, FL 3232
<u> </u>	
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the c (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
the date of filing \	ot meet the applicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
This document is ex	n member or an authorized representative of a member, ecured in accordance with section 605.0203 (1) (b). Florida Statutes, false information submitted in a document to the Department of State agree felony as provided for in s.817.155. F.S.
S125.00 Filing Fee for Articles o	Typed or printed name of signee  Filing Fees:  Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Option) \$ 5.00 Certificate of Status (Option)	al)