## L18000946/6

	(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:	
L		

Office Use Only

APR 18 2018

T. SCOTT



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## COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Clean Cut L Name of Lim	consist a pin of LCC ited Liability Company	,.	চুধি ভাৰত
The enclosed Articles of Organization and fee(s) are	submitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
Maurice Parm	Sep 50		
MAUNICE TURN	Name of Person	<del> </del>	
		<del> </del>	
906 W. 4th S	54.		
	Address	<u> </u>	
Quincy FL.	32351 City/State and Zip Code		
Matienley 7000	for future annual report notification)	11.	yla sa
For further information concerning this matter, please			
	UU2 CAFC		
Maurice Parmer Se at (	850 443 – 9055 Area Code Daytime Telephone Number		
, mane or reisen			
Englosed is a check for the following amount:	•		
\$125.00 Filing Fee \$\int \text{S130.00 Filing Fee & Certificate of Status}	S155.00 Filing Fee & S160.00 Filing I Certified Copy (additional copy is enclosed) Certified Copy (additional copy is	atus &	
Mailing Address	Street Address		
New Filing Section Division of Corporations	New Filing Section Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
	Tallahassee, F1, 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the principal office of the street address and street address of the principal office of the street address of the	ne Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
906 w. 414 st.	906 W. 4th St.	
Quincy FL 32351		
ARTICLE III - Registered Agent, Registered Office, & Regist (The Limited Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	tered Agent's Signature: ed Agent. You must designate an individual or	
The name and the Florida street address of the registered agent ar		
MAURICE PA	rmer Sr.	
Name		
90G LV. 41	14 5t	
Florida street address (P.O. E	Box NOT acceptable)	•

KIEEN KUTS LLC

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.

City State

Registered Agent's Signature (REQUIRED

(CONTINUED)

TENAL E DA 12: 59

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Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	"MGR" Maurice Paemce SA.
	906 (U11h St. Quincy FL 32351
	.,.
(Use attachment if necessary)	
PLCLE V. Effective data if other th	the date of filing: 4-18-18 (OPTIONAL)
in effective date is listed, the date t	ust be specific and cannot be more than five business days prior to or 90 days after
data of filing \	loes not meet the applicable statutory filing requirements, this date will not be listed as
document's effective date on the D	partment of State's records.
FIGLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
	i de la manhar
Signate This docume	re of a member or an authorized representative of a member. Lis executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware th	t any false information submitted in a document to the Department of State
	ard degree felony as provided for in s.817.155, F.S.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Mayerce Parmer Se.
Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)