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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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04/20/18--01009--007 **30.00

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COVER LETTER

	iew Filing Section Division of Corporations	
SUBJECT	r: Uptown Girl (outure L.L.C.
The enclos	sed Articles of Organization and fee(s) ar	e submitted for filing.
Please retu	urn all correspondence concerning this ma	atter to the following:
	Dakilah S	Name of Person
		Name of Ferson
		Firm/Company
	2020 Wilmin	Address St.
	Opa Lock	City/State and Zip Code
	<u>UDtownairl</u>	1 for future annual report notification)
For further	information concerning this matter, pleas	e call:
	Latoya King at (754 829-4758 Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:	
\$125.00	Filing Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address New Filing Section
	New Filing Section Division of Corporations	Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
(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:			
2020 Wilmington St. Opalixkii, Fl. 33054 Opalixkii, Fl. 33054	<u> </u>		
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.)	201	2819	
The name and the Florida street address of the registered agent are:	222	} P	_
Dakilah Seav	HASSE	MPR 20	<u> </u>
2020 Wilmmatun St. Florida street address (P.O. Box NOT acceptable)	E FI P	PM I:	1

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.

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager ANDK	Latona Vina
ANDR	2020 William 2019 24
	Contocka, Fil. 53054
	,
(Use attachment if necessary)	,
·	of filing: $04 20 2018$ (OPTIONAL)
CLEV: Effective date, if other than the date	of tiling: 04 20 2018 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days after
CLE V: Effective date, if other than the date effective date is listed, the date must be sp te of filing.)	ecific and cannot be more than five business days prior to or 90 days after
CLE V: Effective date, if other than the date effective date is listed, the date must be sp te of filing.) If the date inserted in this block does not r	ecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed a
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Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)