

L18000126903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

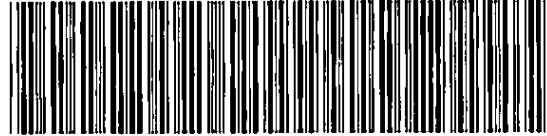
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**CORPORATE
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WALK IN

PICK UP: 5/22

- ☒ **CERTIFIED COPY** _____
- ☐ **PHOTOCOPY** _____
- ☐ **CUS** _____
- ☒ **FILING** articles of organization

1. Alphrite Arlette Sims 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 #)

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SPECIAL INSTRUCTIONS:

**Articles of Organization
For
Alphrita Ardrette Sims LLC**

Florida Limited Liability Company

ARTICLE I - Name:

The name of the Limited Liability Company is Alphrita Ardrette Sims LLC

ARTICLE II - Address:

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

814 N Kentucky Ave #116
Lakeland, FL 33801

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

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

MyCorporation Business Services, Inc.
2455 Hollywood Boulevard PSN #316
Hollywood, FL 33020

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.

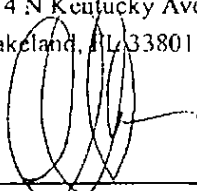


Dana Case, Manager

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:

Alphrita Sims
814 N Kentucky Ave #116
Lakeland, FL 33801



Carri Brown, Organizer

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