

L18000133869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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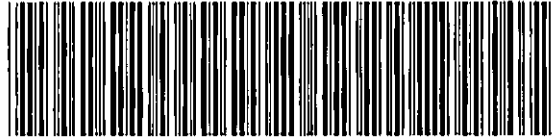
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2020 MAY 31 AM 11:52
SECRETARY OF STATE
HALLAMSBURG, PENNSA

10 MAY 31 AM 11:41

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Mori's Pillow, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jake Kiker, III

Name of Person

Williams, Gautier, Gwynn & Kiker, P.A.

Firm/Company

2010 Delta Blvd.

Address

Tallahassee, Florida 32303

City/State and Zip Code

waltergandy4@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|---|---|

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

**ARTICLES OF ORGANIZATION OF
Mor's Pillow, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I – Name:

The name of the Limited Liability Company (hereinafter referred to as the "Company") is:

Mor's Pillow, LLC

ARTICLE II – Address:

The mailing address of the principal office of the Company is:

**1390 Fort Pickens Road
Unit 246
Pensacola Beach, Florida 32561**

ARTICLE III – Registered Agent:

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

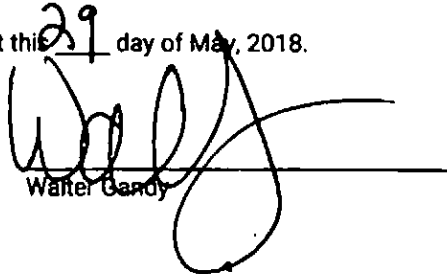
**Walter Gandy
1390 Fort Pickens Road
Unit 246
Pensacola Beach, Florida 32561**

ARTICLE IV – Management:

The Company is to be managed by the members and is, therefore, a member-managed company. The initial members of the Company are:

Walter Gandy, Authorized Member (AMBR)
Lesley Gandy, Authorized Member (AMBR)

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of the Company and acknowledged them to be my act this 29 day of May, 2018.



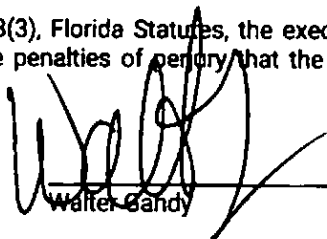
Walter Gandy

FILED
2018 MAY 31 AM 11:52
CLERK OF STATE
TALLAHASSEE, FLORIDA

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this certificate constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)


Walter Gandy