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### **COVER LETTER**

то:	New Filing Section Division of Corporations
cub <i>i</i> e	ASSOCIATION FOR SMART REGULATION, LLC
SUBJE	Name of Limited Liability Company
The end	losed Articles of Organization and fee(s) are submitted for filing.
Please i	eturn all correspondence concerning this matter to the following:
	ADRIAN MIDDLETON, ESQ.
	Name of Person
	Firm/Company
	1469 MARKET STREET
	Address
	TALLAHASSEE, FLORIDA 32312
	City/State and Zip Code ADRIAN@FIGHTINGFORALL.COM
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	ADRIAN MIDDLETON, ESQ. 850 728-2465
	Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
	Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) 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 FOR FLORIDA LIMITED LIABILITY COMPANY

	FOR SMART REGULATION		
(Must	contain the words "Limited L	iability Company, "L	.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and stro	et address of the principal of	fice of the Limited Lia	ability Company is:
Pri	ncipal Office Address:		Mailing Address:
1469 MARKET	ST.		
TALLAHASSEI	· · · · · · · · · · · · · · · · · · ·		
The Limited Liability Components business entity with	an active Florida registration	Registered Agent. You	s Signature: u must designate an individual or
The Limited Liability Components business entity with	pany cannot serve as its own l	Registered Agent, You n.) agent are:	
The Limited Liability Composite business entity with	oany cannot serve as its own an active Florida registration rect address of the registered	Registered Agent, You n.) agent are:	
The Limited Liability Composite business entity with	oany cannot serve as its own an active Florida registration rect address of the registered	Registered Agent, You n.) agent are: ON, ESQ. Name	
The Limited Liability Composite business entity with	oany cannot serve as its own an active Florida registration reet address of the registered  ADRIAN MIDDLETO	Registered Agent, You n.) agent are: ON, ESQ. Name	u must designate an individual or
The Limited Liability Composite business entity with	pany cannot serve as its own an active Florida registration reet address of the registered  ADRIAN MIDDLETO  1469 MARKET STRI	Registered Agent, You n.) agent are: ON, ESQ. Name	u must designate an individual or

Registered Agent's Signature (REQUIRED)

(CONTINUED)

B JUN -4 PM 4:

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager ADRIAN MIDDLETON MGR 1469 MARKET STREET TALLAHASSEE, FLORIDA MARK MARK MGR 1469 MARKET STREET TALLAHASSEE, FLORIDA 32312 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. **ARTICLE VI:** Other provisions, if any. ANY AND ALL LAWFUL ASSOCIATION BUSINESS.

### **REOUIRED SIGNATURE:**

Signature of a member of an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

ADRIAN MIDDLETON, ESQ.

Typed or printed name of signee

### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)