16090	137998
(Address)	100314362301
(City/State/Zip/Phone #)	FILED 2019 JUN -6 PH 2: 03 PERKETARY OF STATE PERKETARASSEE, FLARAS
(Document Number) Certified Copies Certificates of Status	06/06/1801006021 **160.00
Special Instructions to Filing Officer:	日廷(「日VED 2018 JUN -6 PN 1:42 会社会社会社のFSULTE ENLL英MASSEE, FLORDA

### COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: <u>Short Boi Ent</u> 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:

Bryan Pawsey Name of Person 2801 Botany Place Address Tallahassee FL City/State and Zip Code Sholtboicnt IICO gmail. COM E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bryan Dawsey at (800) 300-233 Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee & Certificate of Status S155.00 Filing Fee & Certified Copy (additional copy is enclosed) S160.00 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 FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Short Boi Ent. LLC (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:
2 801 Bottony Place	2 gol Botany Place Tallabassic FL 32301

# 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.)

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

Bryan Priviler		
	Name	
2801 Botany F	lace	
2301 Botany Place Florida street address (P.O. Box NOT acceptable)		
Tollahasore	<u> </u>	3,361
City	State	Zip

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.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2019 JUN-6 PM 2: Ш 0

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Bryan Dawsey 2301 Botany Plate Tallahass FL 32301
AMBR _	Alen Jackson 142 Jackon Ale. Slocont Ac. 36.275
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: 6-6-18 (OPTIONAL) (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.)

<u>Note:</u> 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,

**REOUIRED SIGNATURE:** Signature of a member or 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. Blyan Dawsey Typod or printed name of signce Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) 5 5.00 Certificate of Status (Optional)