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## COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: MAAR Enterprise, LLC Name of Limited Riability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rico R. Taylor  Name of Person
Name of Person
1141 Maple DR
Address
Tallahassee/FL 32301  City/State and Zip Code  ricortaylor egmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Tallahassee/FL 32301 & F City/State and Zip Code ricortaylor egmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rico Taylor at 850 345-8659  Name of Person Area Code Daytime Telephone Number
Name of a crossing and a second a second and
Enclosed is a check for the following amount:
S125.00 Filing Fee Status    S130.00 Filing Fee Status   S155.00 Filing Fee Status
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

The name of the Limited Liability Company is:

MAAR Enterprise, 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:
1141 Maple DR	1141 Maple De
Tailahassee, FL	Talahussee, FL
32-301	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:

Rico R... Taylor

Name

1141 Maple De

Florida street address (P.O. Box NOT acceptable)

Talahassee FL 32301

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)

Title:		Name and Address:	
"AMBR" = A "MGR" = Ma	athorized Member	f 0	
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