L18000182884

(Req	uestor's Name)	
(Add	lress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doo	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

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COVER LETTER

TO:	Registration Section Division of Corporat	tions			
SUBJ	Laugh at Life	, LLC			
SUBJ	ECI:	(Name of Limite	d Liability Comp	pany)	
The e	nclosed Articles of Organ	nization and fee(s) are s	ubmitted for filin	g.	
Please	e return all corresponden	ce concerning this matte	er to the followin	g:	
	Alexandra S Harp				
		(Name of Person)		<u> </u>
	Laugh at Life, LL0	3			
		1	(Firm/Company)	<u>. </u>	
	12028 Kajetan La	ıne			
			(Address)		
	Orlando, Florida	32827			
		(City	/State and Zip Coo	de)	
For fi	urther information concer	ming this matter, please	call:		
Alex	andra S Harp		321	412.0060	
	(Name of Per	son)	(Area Co	de & Daytime Tel	ephone Number)
Encle	osed is a check for the	following amount:		_	_
□ \$12.	5.00 Filing Fee \$\bigcup\$1 Co	30.00 Filing Fee & certificate of Status	\$155.00 Fili Certified C (additional co	_	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Re Div P.C	gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Registra Divisio Clifton 2661 E	Courier Address ation Section n of Corporation Building xecutive Center (assee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liab	pility Company is:		
Laugh at Life, LLC			
(Must end with th	e words "Limited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and stree	et address of the principal office of the Limited I	Liabilit	y Company i
Principal Office Address:	Mailing Address:		
12028 Kajetan Lane Orlando, Florida 32827	12028 Kajetan Lane Orlando, Florida 32827		
ARTICLE III - Registered (The Limited Liability Company cann business entity with an active Florida	Agent, Registered Office, & Registered Agent ot serve as its own Registered Agent. You must designate an ind registration.)	's Signividual o	
The name and the Florida str	reet address of the registered agent are:		JUL.
Alexand	-11	5 -	
	.~	P. ,	
12028 K	(ajetan Lane	. FLONOA	
Florida street address (P.O. Box NOT acceptable)			ပ ာ
Orlando	32827 FL	**	
	City, State, and 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 608, F.S..

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Fitle:</u> 'MGR" = Manager	Name and Address:	
'MGRM" = Managing Member		
MGRM	Alexandra S Harp	
	12028 Kajetan Lane Orlando, FL 32827	<u> </u>
	Onando, FL 32827	
		7)
		_
		
	<u></u>	
(Use attachment if necessary)	ATTACHED IS Article VI : Purpose o	of Business
LE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.)	ATTACHED IS Article VI : Purpose of the date of filing: August 1, 2018 to be specific and cannot be more than the date of the specific and cannot be more than the date of the specific and cannot be more than the date of the specific and cannot be more than the specific and the specific and cannot be more than the specific and the	(OPTION
LE V: Effective date, if other than t	the date of filing: August 1, 2018	(OPTION
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	the date of filing: August 1, 2018	(OPTION five business da
LE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a men	the date of filing: August 1, 2018 t be specific and cannot be more than the specific and cannot be specific as the specific as the specific and cannot be specific as the specific and cannot be specific as the specific as the specific as the specific as the specific and cannot be specific as the sp	(OPTION five business date to be a consideration of the considerat
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a ment of this document contains a signature of a ment of this document o	the date of filing: August 1, 2018 t be specific and cannot be more than the specific and cannot be specific as the specific as the specific and cannot be specific as the specific and cannot be specific as the specific and cannot be specific as the sp	(OPTION five business date to be a consideration of the considerat

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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LAUGH AT LIFE, LLC G17000002814

STATE OF FLORIDA

ARTICLE VI - Business Purpose:

The main purpose will be e-commerce sales of printed products to the general public, and specific consulting, designing and writing projects for various individuals and companies.

Initials of Owner