Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180002870313)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : PARASEC Account Number : I20180000086 Phone

Fax Number

: (916)576-7000 : (800)603-5868

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: 1505@

FLORIDA LIMITED LIABILITY CO.

Solar is me LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER	
TO: Registration Section Division of Corporations	
Solar is me LLC SUBJECT:	
Name of Limited Liability Company	
The applicant Awiples of Opposite the state of the state	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	İ
Vanessa Calhoun	
Name of Person	
Parasec	
Firm/Company	†
2804 Gateway Oaks Dr. #100	
Address	
Sacramento, CA 95833	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
Vanessa Calhoun 800 854	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Certificate of Status (additional copy is enclosed) Certified Copy (additional copy	Status &
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Solar is me LLC
(Must end with the words
ARTICLE II - Address: The mailing address and street address of the pr
Principal Office Add-

st end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

treet address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:	
301 belcher rd N Apt 601		
Largo, FL 33771		

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:

Kamala Gipson		
	Name	
301 beicher rd N Apt	601	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
Largo	FL	33771
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 dulies, and ! 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)

Page 1 of 2

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	kamaia gipson
	301 belcher rd N Apt 601
	Largo, FL 33771
	<u> </u>
(Use attachment if necessary)	
(Ose dimension is necessary)	
OT TO St. Differential Date of Construction at a st.	to of filling (ODTION AT)
CLE V: Effective date, if other than the da	
effective date is listed, the date must be	specific and cannot be more than five business days prior to or 90 da
effective date is listed, the date must be a te of filing.)	specific and cannot be more than five business days prior to or 90 da
effective date is listed, the date must be a te of filing.)	specific and cannot be more than five business days prior to or 90 da t meet the applicable statutory filing requirements, this date will not be
effective date is listed, the date must be te of filing.) If the date inserted in this block does no current's effective date on the Department	specific and cannot be more than five business days prior to or 90 da t meet the applicable statutory filing requirements, this date will not be
effective date is listed, the date must be te of filing.) If the date inserted in this block does no	specific and cannot be more than five business days prior to or 90 da t meet the applicable statutory filing requirements, this date will not be
effective date is listed, the date must be te of filing.) If the date inserted in this block does no current's effective date on the Department	specific and cannot be more than five business days prior to or 90 da t meet the applicable statutory filing requirements, this date will not be
effective date is listed, the date must be te of filing.) If the date inserted in this block does no current's effective date on the Department	specific and cannot be more than five business days prior to or 90 da t meet the applicable statutory filing requirements, this date will not be
effective date is listed, the date must be to of filing.) If the date inserted in this block does no cument's effective date on the Department of the VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 da t meet the applicable statutory filing requirements, this date will not be
effective date is listed, the date must be to of filing.) If the date inserted in this block does no cument's effective date on the Department of the VI: Other provisions, if any. REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90 da t meet the applicable statutory filing requirements, this date will not be nt of State's records.
effective date is listed, the date must be to of filing.) If the date inserted in this block does no cument's effective date on the Department of the VI: Other provisions, if any. REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90 da t meet the applicable statutory filing requirements, this date will not be

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)

Page 2 of 2