# L18000258295

(Requestor's Name)
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(Business Entity Name)
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# COVER LETTER

Division of Corporations	
SUBJECT: PRISSIR 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:	
Préscilla M Hornandez Name of Person	
3708 NW 66Th BLVD	
Jonnings FL. Address	
32053	
City/State and Zip Code  Prissive a gnail. Cou  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Priscilla http://at (386) 855-4753 238 218 682° Name of Person Area Code Daytime Telephone Number	જે
Enclosed is a check for the following amount:	
\$125.00 Filing Fee  Certificate of Status  S155.00 Filing Fee & Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)	
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

### 1 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# ARTICLE 1 - Name:

The name of the Limited Liability Company is:

(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:	
3708 NW 66th BLVD	Same	
Junnings FL 32053		

# 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:

Riscilla Hornandez

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

Jonnings St 32053

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)

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Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address: Priscilla M Harnandez
Manager	3708 NW 66 Th BLVD Jonnings FL 32053
(Use attachment if necessary)	
the date of filing.)	cific and cannot be more than five business days prior to or 90 days after eet the applicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
	auth-
This document is execute I am aware that any false	inber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
Priocilla	M Bernandez Fiscilla The Typed or printed name of signee

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)