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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: N | ew Filing Section ivision of Corporations | | |
|----------------|--|-------------------|---|
| SUBJECT | Bunny's Best Buys, LLC | | |
| SOBJECT | | Limited Liabili | ty Company |
| The enclos | ed Articles of Organization and fee(s) | are submitted | for filing. |
| Please retu | rn all correspondence concerning this | matter to the fo | ollowing: |
| | Anne Ayers | | |
| | | Name of | Person |
| | | Firm/Cor | npany |
| | 1800 Harrison St Apt 905 | | |
| | | Addre | ess |
| | Titusville, FL 32780 | | |
| | hulagrannie@comcast.net | City/State and | Zip Code |
| • | E-mail address: (to be us | sed for future as | nnual report notification) |
| For further is | nformation concerning this matter, ple | ease call: | |
| | Anne Ayers | 321 | 567-0173 |
| | Name of Person | Area Code | Daytime Telephone Number |
| Enclosed is | a check for the following amount: | | |
| \$125.00 Fi | ling Fee \$130.00 Filing Fee & Certificate of Status | Certifie | O Filing Fee & S160.00 Filing Fee, d Copy 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 I - Name:

| Bunny's Best Buy (Must c | ontain the words "Limited I | Liability Company, | 'L.L.C.," or "LLC.") | |
|---|--|--|---|------------------------|
| RTICLE II - Address: he mailing address and stree | et address of the principal of | flice of the Limited | Liability Company is: | |
| <u>Prin</u> | cipal Office Address: | | Mailing Address: | |
| 1800 Harrison St | Apt 905 | 1800 | Harrison St Apt 905 | |
| Titusville, FL 32780 | | | | |
| ARTICLE III - Registered The Limited Liability Comp nother business entity with | Agent, Registered Office, of any cannot serve as its own an active Florida registration | & Registered Agent. (n.) | t's Signature: You must designate an individual or | 2018 M |
| ARTICLE III - Registered The Limited Liability Comp mother business entity with | Agent, Registered Office, of any cannot serve as its own an active Florida registration | & Registered Agent. (n.) | t's Signature: | 2018 NOV 12 |
| ARTICLE III - Registered The Limited Liability Comp another business entity with | Agent, Registered Office, on any cannot serve as its own an active Florida registration eet address of the registered | & Registered Agent. (n.) | t's Signature: | SEURETARY SEURETARY |
| ARTICLE III - Registered | Agent, Registered Office, on any cannot serve as its own an active Florida registration eet address of the registered | & Registered Agent. n.) agent are: | t's Signature: | 2018 NOV 13 PH |
| ARTICLE III - Registered (The Limited Liability Comp another business entity with | Agent, Registered Office, on any cannot serve as its own an active Florida registration and address of the registered Anne Ayers | & Registered Agent. (n.) agent are: Name | t's Signature: 'ou must designate an individual or | 2018 NOV 13 PH |
| ARTICLE III - Registered (The Limited Liability Comp another business entity with | Agent, Registered Office, on any cannot serve as its own an active Florida registration and address of the registered Anne Ayers 1800 Harrison St Apt | & Registered Agent. (n.) agent are: Name | t's Signature: 'ou must designate an individual or | SEURETARY SEURETARY |

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)

| | Name and Address: |
|--|--|
| "AMBR" = Authorized Member | |
| "MGR" = Manager | |
| MGR | Anne Ayers |
| | 1800 Harrison St Apt 905 |
| | Titusville, FL 32780 |
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| (Use attachment if necessary) | |
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| (Ose attachment if necessary) | |
| • | late of filing: upon filing (OPTIONAL) |
| LEV: Effective date, if other than the d | late of filing: upon filing (OPTIONAL) |
| CLE V: Effective date, if other than the diffective date is listed, the date must be | late of filing: upon filing |
| CLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.) | specific and cannot be more than five business days prior to or 90 |
| CLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.) If the date inserted in this block does not | specific and cannot be more than five business days prior to or 90 or meet the applicable statutory filing requirements, this date will not |
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Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Anne Ayers

ARTICLE IV-