119000028052

(R	(equestor's Name)
(A	ddress)
(A	ddress)
(C	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(E	Business Entity Name)
(C	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to	p Filing Officer;
	Office Use Only



800324119618

800324119618 02/01/19--01004--015 **155.00

19 FEB - 1 AH 9: 27

SLUTCHASSECTE CHUBA

T1

T O

19188-1-831615

\$1.20 5.1E

T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

NORMAN MILLER	DESIGN, LL	C	
			-
			
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			✓ L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend, File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			✓ Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
S.g.mars			Vehicle Search
			Driving Record
Requested by: BA	2/1/19		UCC 1 or 3 File
Name	Date	Time	UCC 11 Search
Mailic	Date	Time	UCC 11 Retrieval
Walk-In	Will Pick Up		Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

			•
Norman Miller D			
(Must c	ontain the words "Limited	Linbility Comp	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and sirce	t address of the principal	office of the Lir	nited Liability Company is:
Princ	cipal Office Address:	:	Mailing Address:
314 East Maxwell	Street		314 East Maxwell Street
T .1. (1 VM .1 L.)			
The Limited Liability Compa	gent, Registered Office,	Registered Ag	Lakeland, Florida 33803 Agent's Signature: ent. You must designate an individual o
ARTICLE III - Registered A	agent, Registered Office, ny cannot serve as its own n active Florida registration at address of the registered	Registered Agent.)	Agent's Signature:
ARTICLE III - Registered A The Limited Liability Compa mother, business entity with a	gent, Registered Office, ny cannot serve as its own n active Florida registratic	Registered Agent.)	Agent's Signature:
ARTICLE III - Registered A The Limited Liability Compa mother, business entity with a	agent, Registered Office, ny cannot serve as its own n active Florida registration at address of the registered	Registered Agon.) I agent are:	Agent's Signature:
ARTICLE III - Registered A The Limited Liability Compa mother, business entity with a	agent, Registered Office, ny cannot serve as its own n active Florida registratio et address of the registered Kathleen W. Miller	Registered Agon.) I agent are: Name	Agent's Signature: ent. You must designate an individual o
ARTICLE III - Registered A The Limited Liability Compa nother, business entity with a	agent, Registered Office, ny cannot serve as its own n active Florida registratio et address of the registered Kathleen W. Miller 314 East Maxwell St	Registered Agon.) I agent are: Name	Agent's Signature: ent. You must designate an individual o

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 603, F.S.:

(CONTINUED)

Registered Agent's Signature (REQUIRED)

19 FEB - I AM 9: 27
SILUTANASSET TE ORIDA

,				•		
	• -			. "		
			•	·		
				•		
				•		•
				•		
		ARTICLE IV- The name and address of	Feach person authoriz	zed to manage and control the Limited Liability (Company:	
		Title:		Name and Address:		
		"AMBR" - Authorized N	Member	12 17 19 19 19 19 19 19 19 19 19 19 19 19 19		
		"MGR" = Manager		reshiring are keppen.		
		MOR		Kathleen W. Miller 314 East Maxwell Street		
			•	Lakeland, Florida 33803		
				Description 1. (Office 55005		
		MGR		Pamela B. Norman		
				443 Eunice Drive		
				Lakeland, Plorida 33803	 	
		····		· - · · · · · · · · · · · · · · · · · ·		
			•	· · · · · · · · · · · · · · · · · · ·		
		•				
		,				
				 		
	(If an el	of flling.)	er thân the date of fili ate must be specific a	and cannot be more than five business days pri	or to or 90 days after	
	(If an el the date <u>Note:</u> "	LE V: Effective date, if oth freefive date is listed, the di	er than the date of filli ate must be specific a lock does not meet th	and cannot be more than five business days pri to applicable statutory filing requirements, this d	or to or 90 days after	٠.
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth ffective date is listed, the di of filing.) If the date inserted in this bi	er than the date of filli ate must be specific a lock does not meet th to Department of Stat	and cannot be more than five business days pri to applicable statutory filing requirements, this d	or to or 90 days after	· .
	(If an el the date <u>Note:</u>) the date	LEV: Effective date, if oth ffective date is listed, the di of fling.) If the date inserted in this bl gment's effective date on th	er than the date of filli ate must be specific a lock does not meet th to Department of Stat	and cannot be more than five business days pri to applicable statutory filing requirements, this d	or to or 90 days after	·.
	(If an el the date <u>Note:</u>) the date	LEV: Effective date, if oth ffective date is listed, the di of fling.) If the date inserted in this bl gment's effective date on th	er than the date of filli ate must be specific a lock does not meet th to Department of Stat	and cannot be more than five business days pri to applicable statutory filing requirements, this d	or to or 90 days after	·.
	(If an el the date <u>Note:</u>) the date	LEV: Effective date, if oth ffective date is listed, the di of fling.) If the date inserted in this bl gment's effective date on th	er than the date of filli ate must be specific a lock does not meet th so Department of State	and cannot be more than five business days pri to applicable statutory filing requirements, this d	or to or 90 days after	
	(If an el the date <u>Note:</u>) the date	LEV: Effective date, if oth free five date is listed, the dis of fling.) of fling.) if the date inserted in this blument's effective date on the LEVI: Other provisions, if a REOUIRED SIGNATURE Sign This document is an aware.	er than the date of fills ate must be specific a lock does not meet the Department of State o	and cannot be more than five business days prine applicable statutory filing requirements, this dile's records.	or to or 90 days after ate will not be listed as	· .
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth (feetive date is listed, the die of fling.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if it recourses the second of the REOUIRED SIGNATURE Signature of the date of the second of th	er than the date of filinate must be specific a lock does not meet the Department of States. RE: Lature of a member of mont is excouted in a chird degree felong a third degree felong.	or an authorized representative of a member, televiolation with section 605.0203 (1) (b), Florida nation submitted in a document to the Department	or to or 90 days after ate will not be listed as	
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth (feetive date is listed, the die of fling.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if it recourses the second of the REOUIRED SIGNATURE Signature of the date of the second of th	er than the date of filinate must be specific a lock does not meet the Department of States. RE: Atture of a member ment is executed in a citate any fulse information of the citate o	or an authorized representative of a member, televiolation with section 605.0203 (1) (b), Florida nation submitted in a document to the Department	ate will not be listed as ate will not be listed as a Statutes. at of State	
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth (feetive date is listed, the die of fling.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if it recourses the second of the REOUIRED SIGNATURE Signature of the date of the second of th	er than the date of filinate must be specific a lock does not meet the Department of States. RE: Atture of a member ment is executed in a citate any fulse information of the citate o	or an authorized representative of a member, toordance with section 605.0203 (1) (b), Florida nation submitted in a deciment to the Department of a printed name of signee	ate will not be listed as a Statutes. a Statutes.	
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth free five date is listed, the die of fling.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a REOUIRED SIGNATUI I am aware constitutes Kat	er than the date of fills ate must be specific a lock does not meet the Department of States. Etc. Exture of a member most is excouled in a that any fulse informent the control of the	or an authorized representative of a member, and on submitted in a document to the Department y as provided for in s.817.155, P.S.	ate will not be listed as a Statutes. a of State	~~~
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth free five date is listed, the die of fling.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a REOUIRED SIGNATUI Sign This document is an aware constitutes	er than the date of filinate must be specific a lock does not meet the Department of States. The Department of States of Department of States of Organizate (Optional)	or an authorized representative of a member, and on printed in a deciment to the Department vas proyided for in s.817.155, F.S.	ate will not be listed as a Statutes, at of State	
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth freetive date is listed, the die of filing.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a REOUIRED SIGNATUI I am aware constitutes Kat \$125.00 Filing Fee for A \$ 30.00 Certified Copy	er than the date of filinate must be specific a lock does not meet the Department of States. The Department of States of Department of States of Organizate (Optional)	or an authorized representative of a member, and on printed in a deciment to the Department vas proyided for in s.817.155, F.S.	as Statutes.	
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth freetive date is listed, the die of filing.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a REOUIRED SIGNATUI I am aware constitutes Kat \$125.00 Filing Fee for A \$ 30.00 Certified Copy	er than the date of filinate must be specific a lock does not meet the Department of States. The Department of States of Department of States of Organizate (Optional)	or an authorized representative of a member, and on printed in a deciment to the Department vas proyided for in s.817.155, F.S.	as Statutes.	E
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth freetive date is listed, the die of filing.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a REOUIRED SIGNATUI I am aware constitutes Kat \$125.00 Filing Fee for A \$ 30.00 Certified Copy	er than the date of filinate must be specific a lock does not meet the Department of States. The Department of States of Department of States of Organizate (Optional)	or an authorized representative of a member, and on printed in a deciment to the Department vas proyided for in s.817.155, F.S.	astatutes. a Statutes. a Statutes. a Statutes.	
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth freetive date is listed, the die of filing.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a REOUIRED SIGNATUI I am aware constitutes Kat \$125.00 Filing Fee for A \$ 30.00 Certified Copy	er than the date of filinate must be specific a lock does not meet the Department of States. The Department of States of Department of States of Organizate (Optional)	or an authorized representative of a member, and on printed in a deciment to the Department vas proyided for in s.817.155, F.S.	astatutes. a Statutes. a Statutes. a Statutes.	E
	(If an el the date <u>Note:</u>) the date	LE V: Effective date, if oth freetive date is listed, the die of filing.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a REOUIRED SIGNATUI I am aware constitutes Kat \$125.00 Filing Fee for A \$ 30.00 Certified Copy	er than the date of filinate must be specific a lock does not meet the Department of States. The Department of States of Department of States of Organizate (Optional)	or an authorized representative of a member, and on printed in a deciment to the Department vas proyided for in s.817.155, F.S.	as Statutes.	E