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(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SILVAETARY OF STATE AND ANASSEE, FLORIG FILED



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19 FEB 13 PM 1:43

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Apocalyptic Brick Company LLC Name of Limited Liability Company FTN # 83-35
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dustin Blake Chambley Name of Person
3955 FL-CiA Huy
Havana FL 32333
Address
City/State and Zip Code Chambley bdustin & gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Duckin Chambles at (1850) 815 5243 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125,00 Filing Fee SCertificate of Status S155,00 Filing Fee SCERTIficate of Status S155,00 Filing Fee SCERTIficate of Status S155,00 Filing Fee SCERTIFICATE OF Status SCERTIFICATE OF STATUS STATU
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

APocalyptic Brick Company LLC
(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:
3955 FL-GA HWY	3955 FL-GA HWY
Havana FL	Havana FC
32333	

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:

Name

3955 FL - GA Hwy

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

Haigna FL 32333

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 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)

2019 FEB 13 PM 1:52

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMRI	Dustin Chambler
-/	3955 FI GA HUX
	Havana FL 32333
	
effective date is listed, the date must be of filing.) If the date inserted in this block does	date of filing:
effective date is listed, the date must be of filing.) If the date inserted in this block does	e specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed:
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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)