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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : SUPERBIZ.COM, INC.
Account Number : 120070000160
Phone : (800) 494-3124
Fax Number : (305) 675-2811

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
AMAZING TREASURES LLC**

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

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Electronic Filing Menu

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Help

124

#19000070484 3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I NAME**

The name of the Limited Liability Company is:

AMAZING TREASURES LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

1255 BELLE AVENUE UNIT 176

WINTER SPRINGS, FLORIDA 32708

ARTICLE III REGISTERED AGENT

The name and the Florida street address of the registered agent are:

KRIS HOLMES

1255 BELLE AVENUE UNIT 176

WINTER SPRINGS, FLORIDA 32708

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.

X /s/ Kris Holmes

KRIS HOLMES / Registered Agent's signature

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19 MAR 31 PM 1:02
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#19000070484 3

H-19000070484-3

PAGE 2 AMAZING TREASURES LLC

ARTICLE IV AUTHORIZED PERSON(S)

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

AUTHORIZED MEMBER

KRIS HOLMES

1255 BELLE AVENUE UNIT 176

WINTER SPRINGS, FLORIDA 32708

AUTHORIZED MEMBER

CHRISTOPHER MAYS

1255 BELLE AVENUE UNIT 176

WINTER SPRINGS, FLORIDA 32708

.....

X /s/ Kris Holmes

KRIS HOLMES / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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19 MAR 31 PM 1:08
FLORIDA

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