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N CULLIGAN APR 1 3 2019

COVERLETTER

	illing Section on of Corporations		
SUBJECT: _	Daysha and	/ Na te LLC nited Liability Company	
The enclosed A	articles of Organization and fee(s) are	e submitted for filing.	
	I correspondence concerning this ma		
	Nathan Gerad	Corry	
_		Name of Person	
_	210 Mitchell C	incle	
		Address	
<u>(</u>	Zuincy FL 32	351	
_0	urry Nathun 63606	ity/State and Zip Code Mail. Com for future annual report notification)	
	E-mail address: (to be used	for future annual report notification)	
	mation concerning this matter, please		_
Λ	athan Curry all	3735 <u>1</u> , B P50 - 570- 09	12
./	Name of Person A	rea Code Daytime Telephone Number	<u></u>
Enclosed is a c	heck for the following amount:		
\$125.00 Filing	Fee \$\int_\$\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) Certi	.00 Filing Fee, ificate of Status & fied Copy onal copy is enclosed)
	Mailing Address	Street Address	
	New Filing Section Division of Corporations	New Filing Section Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clition Building 2661 Executive Center Circle	
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Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Naysha and Nate 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:
210 Mitchell Circle	210 Mitchell Circle
QU'OCU FL	Quincu FL
	

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:

Akthun Comp

216/Wilchell Circle Quincy, FL

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

avincy FL 32357

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 전기 1등 사내 용료

ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company: Tide: "AMBR" = Authorized Member "MGR" = Manager 210 Mifchell Circle Quincy FL, Nathway Curry (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE: Mathen Cory

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Mithus Curris

Typed or printed name of signee

Filing Fees:

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

\$ 30,00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)