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### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Meyerice Holdings and Investments LCC Name of Kimited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	,·
Dava M Gray Name of Parson	開せている
Firm/Company 3	がいま
1052 Pollow Pose drive	
City/State and Zip Code  Peaches 167@col. Com  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:  \$\int \text{S125.00 Filing Fee} \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, 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	:
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The name of the Limited Liability Company is:

Maybe Holdings ant Instructs (CC (Must contain the words "Limited Lability Company, "L.L.C.," or "L.L.C.")

### ARTICLE II - Address:

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

Principal Office Address:

1052 Gellas Pose dr. 0e
Collando 1-C 32818

Mailing Address:

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

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

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)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	s
"MGR" = Manager	Richard Albert 2016 Cateville 12d	ON SEC
AUBR	Daviel Gray P.O. Box 130 791	
AMBR	Dans Gray 1052 Collas Pasedo Orano, FC3288	A C J
		- - -
(Use attachment if necessary)		
the date of filing.)	ne specific and cannot be more than five business days prior to or 9	-
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:  Signature of	a member or an authorized representative of a member.	-
This document is ex I am aware that any	secuted in accordance with section 605.0203 (1) (b), Florida Statutes false information submitted in a document to the Department of Stategree felony as provided for in s.817.155, F.S.	

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

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)

# Cover Letter for LLC

Name:

Mayhue Holdings and Investments LLC

Contact:

Dana M Gray

1052 Yellow Rose drive

Orlando, FL

407-267-6575

