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# FLORIDA LIMITED LIABILITY CO. **CUSTOM FITZ LLC**

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MAY 29 2019

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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I NAME

The name of the Limited Liability Company is:

CUSTOM FITZ LLC

#### ARTICLE II ADDRESS

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

618 CHESTER DRIVE

LAKELAND, FLORIDA 33803

### ARTICLE III REGISTERED AGENT

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

ALA REGISTERED AGENT INC.

5647 110TH AVENUE N

ROYAL PALM BEACH, FLORIDA 33411

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.

/s/ Tina Maki

TINA MAKI / Registered Agent's signature



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PAGE 2 CUSTOM FITZ LLC

## ARTICLE IV AUTHORIZED PERSON(S)

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

AUTHORIZED MEMBER

CAMILLE IVY STOKES

618 CHESTER DRIVE

LAKELAND, FLORIDA 33803

AUTHORIZED MEMBER

MONIQUE D CROCKER

618 CHESTER DRIVE

LAKELAND, FLORIDA 33803

/s/ Monique D. Crocker

MONIQUE D CROCKER / 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.)