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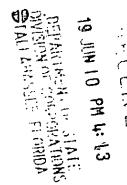
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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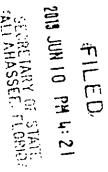
Office Use Only



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#### COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: PEXIE 3 4 LLC		
Name of Limited Liability	Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
KERVIN D. FOWLER		
Name of Person		
	,	
130 SALEM CT		
Address		
TALLAHASSEE FL 32301		
City/State and Zip Code		
KERVIN. FOWLER @ GMAIL. COM		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
KERUIN FOULER at ( 850 ) 493,7747		
	Daytime Telephone Number	
Name of Person Area Code	Daytime relegione sumber	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\frac{\$130.00 \text{ Filing Fee & Certified Certified}}{\text{Certified (additional)}}\$	Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address S	treet Address	
New Filing Section N	lew Filing Section	
	Division of Corporations Hifton Building	
	661 Executive Center Circle	

Tallahassee, FL 32301

FILED.
2019 JUNIO PH 4: 21
SCORETARY OF STATE FALL AHASSEE, FLORIDS

## Articles of Organization of Rexie 3 4, LLC

#### A Florida Limited Liability Company

#### ARTICLE I NAME

The name of the limited liability company is Rexie 3 4, LLC

#### ARTICLE II PURPOSE

The purpose of the limited liability company shall include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.

### ARTICLE II ADDRESS

The street address of the limited liability company is 130 Salem Court, Tallahassee, FL, 32301, and the mailing address is P.O. Box 896, Tallahassee, FL 32302.

### ARTICLE III DURATION

The term of the limited liability company shall be perpetual.

### ARTICLE IV REGISTERED AGENT'S OFFICE AND SIGNATURE

The name, street address and signature of the registered agent of the limited liability company are as follows:

Gary A. Roberts, 130 Salem Court, Tallahassee, Florida, 32301

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 in Chapter 605, Florida Statutes.

Gary A. Roberts, Registered Agent

### ARTICLE V MANAGEMENT

The limited liability company shall be managed by a manager. The initial Manager is Kervin D. Fowler who shall have the right and the complete power and authority to manage and operate the LLC.

#### ARTICLE VI EFFECTIVE DATE

The effective date of the limited liability company shall be the date of filing the Articles of Organization.

IN WITNESS WHEREOF, a member executes this document on June 10th, 2019 to be effective upon filing with the Florida Department of State.

Member:

Kervin D. Fowler

SECRETARY OF STATE ALL AHASSEE FLORID

(The execution of this document constitutes an affirmation under 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 in s.817.155, F.S.)