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N CULLIGANI JUN 2 6 2019

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Best Foot Forward Distribution Name of Limited Liability Company
The enclosed Articles of Organization and fec(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Brenda J. R. bb/c Name of Person
Best Foot For Ward Pistribution Firm/Company
2911 16th St. W
Lehigh Aeres FL 33971 City/State and Zip Code best foot for word distribution @ gmail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Brenda J.R. bole at 740 341-7853 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certificate of Status (additional copy is enclosed) \$160.00 Filing Fec. Certificate of Status & Certificate Opy (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

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А	кн	€	. P.	. 1	ame:

The name of the Limited Liability Company is:

Best Foot For Ward Distribution 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:

29/1/6th 5tW 29/1/6th 5tW Lehigh Acres Ft Lehigh Acres, F 33971	<u>)</u> = <u></u>
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 individuanother business entity with an active Florida registration.)	ual or
The name and the Florida street address of the registered agent are: Branda J. R. bb/a Name	JUN 13
Florida street address (P.O. Box NOT acceptable) Lehigh Acres FL 33971 City State Zip	E. FLORIDA

Mailing Address:

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)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGA	Brenda JR hble 29 11 14 1h 37 W 50 Kehigh Acres, FL, 339727
	FILED SHID: 03
(Use attachment if necessary)	ŕ
f an effective date is listed, the date must be spone date of filing.)	of filing:
REQUIRED SIGNATURE:	775hhl.
This document is execut I am aware that any false	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.
Branda	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)