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(Re	equestor's Name)	
(Ad	ldress)	<u>. </u>
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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T. BURCH --- 1 2019

COVER LETTER

TO:	New Filing Section Division of Corporations				
CHRI	RAZIAMAKER LLC				
Name of Limited Liability Company					
The en	closed Articles of Organization and fee(s) are submitted for filing.				
Please	return all correspondence concerning this matter to the following:				
	RAZIA HOSSAIN				
	Name of Person				
	RAZIAMAKER LLC				
	Firm/Company				
	3228 55TH ST EAST				
	Address				
	PALMETTO, FL 34221				
	City/State and Zip Code				
	raziahossainnc@gmail.com E-mail address: (to be used for future annual report notification)				
For furth	er information concerning this matter, please call:				
	RAZIA HOSSAIN 571 778-2535				
	Name of Person Area Code Daytime Telephone Number				
Enclose	d is a check for the following amount:				
\$125.0	Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) 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

RAZIAMAKER (Must c	LLC ontain the words "Limited	Lightlity Company	"I C "or "I C ")	
	ontain the words. Enimed	Liability Company,	E.E.C., OF EEC.	
ARTICLE II - Address: The mailing address and street	et address of the principal o	office of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
3228 55TH ST E.	3228 55TH ST EAST		S 55TH ST EAST	
PALMETTO, FL 34221		PAI	METTO, FL 34221	
ARTICLE III - Registered				
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, any cannot serve as its own	& Registered Agent		l or
(The Limited Liability Comp	Agent, Registered Office, any cannot serve as its own an active Florida registration	, & Registered Agent.	nt's Signature:	
(The Limited Liability Companother business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration	, & Registered Agent.	nt's Signature:	
(The Limited Liability Companother business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registere	, & Registered Agent.	nt's Signature:	
(The Limited Liability Companother business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration eet address of the registere	, & Registered Agent n Registered Agent on.) d agent are:	nt's Signature:	2019 JUN 17 SECRETARY I
(The Limited Liability Companother business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration and address of the registere RAZIA HOSSAIN	& Registered Agent. on.) d agent are: Name	nt's Signature: You must designate an individua	2019 JUN 17 AM SEGRETARY OF S
(The Limited Liability Companother business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration at address of the registere RAZIA HOSSAIN 3228 55TH ST EAS	& Registered Agent. on.) d agent are: Name	nt's Signature: You must designate an individua	2019 JUN 17 SECRETARY I

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..

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager RAZIA HOSSAIN	3228 55TH ST EAST	
	PALMETTO, FL 34221	
WADE WHITTIER	3228 55TH ST EAST	:n •1
WADE WHITTIEK	PALMETTO, FL 34221	→
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(Use attachment if necessary)		
If an effective date is listed, the date must be spe the date of filing.)	of filing: (OPTION cific and cannot be more than five business days price the applicable statutory filing requirements, this days of State's records.	or to or 90 days after
ARTICLE VI: Other provisions, if any.		
Signature of a me This document is execut I am aware that any false	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida information submitted in a document to the Departme felony as provided for in s.817.155, F.S.	a Statutes.
	RAZIA HOSSAIN Typed or printed name of signee	

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

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)