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## **CORPORATE**

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### WALK IN

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SPECIAL INSTRUCTIONS:			(CORPORATE NAME AND DOCUMEN	VT #)		<u>.</u>
	SPECIAL INSTRUCTIONS:					

#### COVER LETTER

	w Flling Section vision of Corporations
SUBJECT:	XPEDITION ENTERPRISES, LLC
JUBURCI.	Name of Limited Liability Company
The enclosed	d Articles of Organization and fee(s) are submitted for filing.
Please return	all correspondence concerning this matter to the following:
	Mark Heck
	Name of Person
_	Firm/Company
_	1068 Route 70
	Address
_	Lakehurst, NT 08733  City/State and Zip Code
	alexisheck@mark-itservices.com
	E-mail address: (to be used for future annual report notification)
For further info	ormation concerning this matter, please call:
P	Dominick Belcarton ( 732 ) 1057 - 7200
	Name of Person Area Code Daytime Telephone Number
Enclosed is a	check for the following amount:
<b>]\$</b> 125.00 Filir	S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section New Filing Section
	New Filing Section New Filing Section Division of Corporations Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

XPEDITION ENT				
(Must co	ontain the words "Limited Lial	hility Company,	"L.L.C.," or "LEC.")	
ARTICLE II - Address: The mailing address and stree	t address of the principal offic	e of the Limited	Liability Company is:	
<u>Princ</u>	ipal Office Address:	Mailing Address:		
668 Route 70 West		668 Route 70 West		
COUNTY OF THE PARTY OF THE PART	Lakehurst, NJ 08733		Lakehurst, NJ 08733	
Lakehurst, NJ 087  RTICLE III - Registered A  The Limited Liability Compa nother business entity with a	33 agent, Registered Office, & F	Registered Agents		
Lakehurst, NJ 087  ARTICLE III - Registered A The Limited Liability Compa mother business entity with a	agent, Registered Office, & For the registered agent address of the registered agent REGISTERED AGENT	Registered Agents Sent are:	nt's Signature: You must designate an individual or	
Lakehurst, NJ 087  ARTICLE III - Registered A The Limited Liability Compa mother business entity with a	agent, Registered Office, & Format in active Florida registration.)  et address of the registered agent REGISTERED AGENT	Registered Agent. Vent are: SOLUTIONS, I	nt's Signature: You must designate an individual or	
Lakehurst, NJ 087  ARTICLE III - Registered A The Limited Liability Compa another business entity with a	agent, Registered Office, & For the registered age of the register	Registered Agents Sent are: SOLUTIONS, I	nt's Signature: You must designate an individual or INC.	
Lakehurst, NJ 087  ARTICLE III - Registered A The Limited Liability Compa mother business entity with a	agent, Registered Office, & Format in active Florida registration.)  et address of the registered agent REGISTERED AGENT	Registered Agents Sent are: SOLUTIONS, I	nt's Signature: You must designate an individual or INC.	
Lakehurst, NJ 087  ARTICLE III - Registered A The Limited Liability Compa another business entity with a	agent, Registered Office, & For the registered age of the register	Registered Agents Sent are: SOLUTIONS, I	nt's Signature: You must designate an individual or INC.	

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	Name and Address:		
"MGR" = Manager MMBR	Mark Heck 668 Route 70 West Lakehurst, NJ 08733		
MBR	Trisha Heck 668 Route 70 West Lakehurst, NJ 08733		
(Use attachment if necessary)			
(If an effective date is listed, the date must be specif the date of filing.)	filing: (OPTIONAL) ic and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed as state's records.		
ARTICLE VI: Other provisions, if any.			
REQUIRED SIGNATURE:	22/21		
This document is executed in I am aware that any false inf	er or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes. formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.		
Mark Heck			

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)