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	ACCESS,	When you need ACCESS to the world
	INC.	236 East 6th Avenue. Tallahassee, Florida 32303 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666
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	Little Citiz (CORPORATE NAME AND DOCU	ens Investments LLC
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COVER LETTER

New Filing Section Division of Corporations

TO:

SUBJECT: Little Citizens Investments LC 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:
Jason MATThews
Name of Person
<u>Little Citizens Investments LLC</u> Firm/Company
301 W Platt St., #343
Address
TAMPA FL 33606
TAMPA FL 33606 City/State and Zip Code Jmatt@ teamAbv. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jason MATThews at 412 414-4405 Name of Person Area Code Daytime Telephone Number
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 Certified Copy (additional copy is enclosed) \$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center CircleTallahassee, Fl. 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(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:

301 W Platt St. #343

TAMPA FL 33606

TAMPA FL 33606

Mailing Address:

Mailing Address:

TAMPA FL 33606

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 individual or another business entity with an active Florida registration.)

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

Jason MATThews

Name

301 W Platt St., #343

Florida street address (P.O. Box NOT acceptable)

TAMPA FC 33606

City State Zip

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)

Title:	uthorized to manage and control the Limited Liability Company:
"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager $MMQQ$	
	Jason Matthews
2 5 0	TAMPA, FC 33606
MGR	Julie (Matthews
	301 W Platt St., #343
	- 14MM, FC 33606
(Use attachment if necessary)	
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