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(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		





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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Simple GURU LLC Name of Limited	
Name of Limited	Liability Company
The enclosed Articles of Organization and fee(s) are su	bmitted for filing.
Please return all correspondence concerning this matter	to the following:
Christopher Trulove	
	•
6210 Pinetree Ave	Address
Panama City Beach, FL City Chris @ Simpleguru.co E-mail address: (to be used for	State and Zip Code
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please ca	
Chris Trulose al (67)	5 , 689-3604
Name of Person Area	Code Daytime Telephone Number
Enclosed is a check for the following amount:	
S125.00 Filing Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section Division of Corporations P.O. Box 6527 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

Simple BURU LLC	
(Must contain the words "Limited Liability C	ompany, "L.L.C.," or "LLC,")
ARTICLE II - Address: The mailing address and street address of the principal office of the	Elimited Liability Company is:
Principal Office Address	Mulling Address

r incipat Office Additess:	winning Addit c58;
6210 Pinetree Ave	6210 Pinetree the
Panama City Beach, FL 32404	Parana City Beach, FL 32408

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:

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Christopher	Tralove	
	Name	
6210 Pinetr	ee Ave	
Florida street addres	s (P.O. Box <u>NOT</u>	acceptable)
Panama City Be	ach FL	32408
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. Thereby 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 the 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)

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Title:		Name and Address:	
"AMBR" = Authoria	zed Memb e r		
"MGR" = Manager		Christopher Tralaxe	
MGR		Christopher Trulove 6210 Pinetree Live Anama City Brach, FL	·
		Anama City Brach FL	32408
			
_			
			
.E.V: Effective date.	if other than the date of filing:	d cannot be more than five busine	(OPTIONAL) ss days prior to or 90
ffective date is listed, of filing.) If the date inserted in ument's effective dat	if other than the date of filing, the date must be specific and this block does not meet the e on the Department of State	d cannot be more than five busine applicable statutory filing requirem	ss days prior to or 90
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LE V: Effective date ffective date is listed. of filing.) If the date inserted in ument's effective dat LE VI: Other provision REOURED SIGN	this block does not meet the action of state this block does not meet the action on the Department of State ons. if any. SATURE: Signature of a member of is document is executed in acting a state of the action of the state o	applicable statutory filing requirems records. r an authorized representative of recordance with section 605.0203 (1) ation submitted in a document to the	a member. (b), Florida Statutes. e Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)