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PICK-UP	☐ WAIT	MAIL	
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Certified Copies	_ Certificates	of Status	
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Surflower Road Estate and Development LLC 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:
Zugui Wang. Name of Person
Surflower Real Estate and Development LL
1114 Thomasville Rel Switze W
Tallahassee. FL 32303
Tallahassee. FL 32303 City/State and Zip Code MKing investment and Sip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Zugui Wang at (856) 4598889 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
EZ\$125.00 Filing Fee
Mailing AddressStreet AddressNew Filing SectionNew Filing Section DivisionDivision of CorporationsThe Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

sunflower Real Estate and Development LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

homasville RdSuite W P.OBOX 14791, Tallahassee, FL 32317 hassee, FL 32303

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:

Zugui Wang

1114 Thomasville Pu Suite W Florida street address (P.O. Box NOT acceptable)

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 l am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Zhongli Wang ZIII Femleigh Dr. Tallahassee, Et. 32311
AMBR	Zugui Wang 2609 Antietam Trail
	Tallahussee. FL 32312
(Use attachment if necessary)	
(If an effective date is listed, the date must be s the date of filing.)	e of filing:
ANTICES VI. Office provisions, it any.	
REQUIRED SIGNATURE:	ma is
This document is exec I am aware that any fal	nember or an authorized representative of a member, uted in advordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.
<u>Zugni</u>	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)
- S 5.00 Certificate of Status (Optional)