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TO: **New Filing Section Division of Corporations** 2020 APR 21 AM 9:54

The MASSIE ...

EA Investment Lots, LLC. SUBJECT: _____

Glen Frost, Esq.

For further

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:

			Firm/Co	mpany	
839 Bestga	e Road, Ste. 400				•
			Addre	ess	
Annapolis,	MD 21401				
		Cit	y/State and	d Zip Code	
glen.frost@f	rosttaxlaw.com				
	E-mail address: (to	be used f	or future a	nnual report notificat	ion)
ner information c	oncerning this matter	r, please	call:		
Glen Frost		at (410	497-5947	
Glen Frost					
	ne of Person		ea Code	Daytime Telephon	e Number
Nat	ne of Person	Are	ea Code	Daytime Telephon	e Number

Name of Person

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		FIL	ED
-		2020 APR 21	AM 9: 51
lity Company,	"L.L.C.," or "LLC.")	· 31 111. ;	
		MULAMASSET	
of the Limited	Liability Company is:		
	Mailing Ado	<u>lress</u> :	
9429	Harding Avenue		
Surf	side, FL 33154		
D. Box NOT ac	cceptable)		
FL	33470		
11	27710		
State	Zip		
State process for the ent as registere g to the proper gistered agent o		t in this capacity. I nce of my duties, an er 605, F.S	ad I
State process for the ent as registere g to the proper gistered agent of the proper gistered gister	Zip above stated limited lia ed agent and agree to ac and complete performa is provided for in Chapt	t in this capacity. I nce of my duties, an er 605, F.S	ad I
	9429 # 153 Surfacesistered Agent. V	9429 Harding Avenue # 158 Surfside, FL 33154 egistered Agent's Signature: stered Agent. You must designate an i	Mailing Address: Mailing Address: 9429 Harding Avenue # 158 Surfside, FL 33154 egistered Agent's Signature: stered Agent. You must designate an individual or nt are:

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
	thorized Member
"MGR" = Man	· ·
<u>MGR</u>	JA & EA Enterprises. LLC.
	163 N. 4th St. Laramic, WY 82072
	Laranne, W 1 02072
(Use attachmer	at if managemy)
(Ose attachme)	it it necessary)
ARTICLE V: Effective	date, if other than the date of filing: (OPTIONAL)
	sted, the date must be specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	
	ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as
the document's effectiv	e date on the Department of State's records.
ARTICLE VI: Other pro	nacione if any
ARTICLE VI. Onlei pie	Nisions, it any.
•	
REQUIRED S	GIGNATURE: She C. There
	Du E. AND
	Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	I am aware that any false information submitted in a document to the Department of State
	constitutes a third degree felony as provided for in s.817.155, F.S.
	Glen Frost Typed or printed name of signee
	ryped or printed name or signee

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