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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: FORC3 STUDIOS	
Subsect.	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	
Name of Person	
MA	
Firm/Company	
ZZH W. GONZalez St.	
Address	
Pensacola: Fl 32505	
FORC3 Photography @ 9 mail. com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Calvin Geiffin II at (334) 268. 8266	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed))
Mailing Address Street Address	
New Filing Section New Filing Section Division	
Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
Tallahassee, FL 32314 Tallahassee, FL 32303	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability	y Company is:			
FURC	3 STUDIO	S LL	_ a	
(Must cont	ain the words "Limited I.	iability Comp	any, "L.L.C.," or "LLC."	")
ARTICLE II - Address: The mailing address and street a	ddress of the principal of	fice of the Lin	lited Liability Company	is:
<u>Princip</u>	al Office Address:		Mailing	Address:
2214 W. GO <u>Pensaroka</u>	ntalez St. , FL 32505	·	Pensacoia	17621 ; FL 32522-7621
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an	cannot serve as its own	Registered Age		an individual or
The name and the Florida street	address of the registered	agent are:		
	<u>Cavin O.</u>	QUITHY	<u>) II </u>	
	2214 W. G	Name NEWC	t st.	
	Florida street address			
	Penisacola	PL_	32505	_
	City	State	Zip	
Having been named as registered place designated in this certificate further agree to comply with the plam familiar with and accept the ol	I hereby accept the apportions of all statutes replications of my position of the statutes of	intment as reg lating to the pr	istered agent and agree is oper and complete perforent as provided for in Co	to act in this capacity. I rmance of my duties, and I

(CONTINUED)

FILED
2020 HAY IN FH 3: 50

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 MGR	COVIN O. GEIFIN II 2214 W. GONZOLEZ ST. PENSOCOIO, FL 32505
(Use attachment if necessary)	
If an effective date is listed, the date must be he date of filing.)	late of filing: 05 13 2020 (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after ot meet the applicable statutory filing requirements, this date will not be listed as ent of State's records.
ARTICLE VI: Other provisions, if any.	A
This document is ex-	member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes.
	alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S. D. QUIN II 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)

\$ 5.00 Certificate of Status (Optional)