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2020 JUN 12 PH 2: 25
SECRETATIVE OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	ECT: Mira'CleSweetz, L.L.C. Name of Lir	nited Liability Company
The en	closed Articles of Organization and fee(s) a	re submitted for filing.
Please	return all correspondence concerning this m	atter to the following:
	Tamira Moore	Name of Person
	Mira'CleSweetz, L.L.C.	Firm/Company
	820 E. Dayton Circle	Address
	Fort Lauderdale, FL 33312	City/State and Zip Code
<u>M</u>	iraclesweetz1@gmail.com E-mail address: (to be use	d for future annual report notification)
For fur	ther information concerning this matter, plea	ase call:
<u>Tamir</u>	na Moore at () Name of Person	Area Code Daytime Telephone Number
	ed is a check for the following amount: 00 Filing Fee S130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed) □\$155.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Mira'CleSweetz, L.L.C. (Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal of	Tice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
820 E. Dayton Circle Fort Lauderdale, FL 33312	820 E. Dayton Circle Fort Lauderdale, FL 33312
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration.) The name and the Florida street address of the registered.	Registered Agent. You must designate an individual or n.)
Tamira Moore	
Name	
820 E. Dayton Circle Florida street address (P.O. Box	NOT acceptable)
Fort Lauderdale	<u>FI, 33312</u>
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obl	vice of process for the above stated limited liability company as the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance igations of my position as registered agent as provided for in er 605, F.S
Tommer a	
Registered Agent's Signat	ure (REQUIRED)

(CONTINUED)

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

"AMBR" = Authorized Member	Name and Address:
WANDY - WRIGHTSER MEHIOGL	
"MGR" = Manager	
MGR	Tamira Moore
	820 E. Dayton Circle
	Fort Lauderdale, FL 33312
	
	
	
(Use attachment if necessary)	
(Ose andennen n necessary)	
ICLE VI: Other provisions, if any.	
······································	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
anusta	member or an authorized representative of a member.
Signature of a (In accordance with section	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
Signature of a (In accordance with section constitutes an affirmation to	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true.
Signature of a (In accordance with section constitutes an affirmation to I am aware that any false in	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. 605.0203 (1) (b), Florida Statutes, the execution of this document in the penalties of perjury that the facts stated herein are true.
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Signature of a (In accordance with section constitutes an affirmation u I am aware that any false ir constitutes a third degree for a section of the section	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.) The Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent 1)

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2020 JUN 12 PM 2: 25 Caldina din Coe State Mira'CleSweetz, L.L.C. 820 E. Dayton Circle Fort Lauderdale, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of Mira'CleSweetz, L.L.C.:

Tamira Moore 820 E. Dayton Circle Fort Lauderdale, FL 33312

Tamira Moore, Organizer

06/03/2020 Date

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