rida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000194754 3)))



H200001947543ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: DAVID E HIGHTOWER

Account Number : 120060000090

Phone

: (850)549-3812

Fax Number

: (850)607-2663

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO. Only T, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Help

(((H20000194754 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is Only T, LLC

ARTICLE II - Address

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

11 E. Garden Street Pensacola, Florida 32502

ARTICLE III - Duration

The period of duration of the Limited Liability Company shall be indefinite.

ARTICLE IV - Management

The Limited Liability Company is to be managed by one or more managers in accordance with the company's operating agreement. The name of the initial manager is Teresa S. Levin.

ARTICLE V - Registered Agent

The name and street address of the initial registered agent of the Limited Liability Company are:

Hightower Law Firm 119 North Palafox Street Pensacola, Florida 32502

ARTICLE VII - Effective Date

Pursuant to section 605.0207, Florida Statutes, the effective date for the beginning existence of the limited liability company shall be June 24, 2020.

6/24/2020

Dated

David E. Hightower, Authorized Representative of a Member

(((H20000194754 3)))

(((H20000194754 3)))

REGISTERED AGENT ACCEPTANCE

Having been named as registered agent and to accept service of process for the above stated limited liability company at the address designated in this certificate pursuant to the provisions of section 605.0113, Florida Statutes, 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 I am familiar with and accept the obligations of my position as registered agent.

HIGHTOWER LAW FIRM

6/24/2020

Dated

SECILE IAK OF STATE