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SECRETARY OF STATE PROPAUG

TOWN MOOD CO.

## COVER LETTER

	lew Filing S Pivision of C	ection orporations				
SUBJECT	•	anson, LLC				
000000	•		une of Limit	ied Liabil	ity Company	
The enclos	sed Anicles (	of Organization an	d fee(s) are :	submitted	for filing.	
Please retu	ırıı all corres	pondence concerni	ng this matt	er to the !	ollowing:	
	John Ainsv	worth, Esq.				
				Name of	Person	
	Ainsworth	& Clancy, PLLC				
				Firm(Co	mpany	
	801 Bricke	ll Avenue, 8th Flo	ot			
				Addr	288	
	Miami, FL	33131				
i	into@busine	ss-esq.com	City	State and	Żip Code	-
_		E-mail address: (to	be used for	r futere a	nnual report notificat	ion)
For further in	iformation co	oncerning this man	er, please ca	ıH;		
·	John Ainsw	orth	305 at (		600-3816	
	Nan	ne of Person	Area	Code	Daytime Felephon	e Number
Enclosed is	a check for t	the following amou	mt:			
<b>≣\$</b> 125.00 }	Filing Fee	□\$130.00 Filin Certificate of S	tatus	Certifie	00 Filing Fee & d Copy I copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division P.O. B	ng Address Tling Section on of Corporations tox 6327 assec F1 32314		) T 2	Areet Address Tew Filing Section Di the Centre of Tallaha 415 N. Monroe Street	ssee et, Suite 310

FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY AUG 27 AH 10: 58

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE, FL

(Must cor	unin the words "Limited Lia	ibility Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address:			
he mailing address and street	address of the principal offi	ce of the Limited	Liability Company is:
<u>Princi</u>	pal Office Address:		Mailing Address:
1100 Brickell Bay I	Drive, Unit #310747	110	O Brickell Bay Drive, Unit #310747
Miami, FL 33231			mi, FL 33231
The Limited Liability Compan nother business entity with an	y cannot serve as its own Re active Florida registration.)	egistered Agent.	nt's Signature: You must designate an individual o
nother business entity with an	y cannot serve as its own Re active Florida registration.)	egistered Agent.	nt's Signature: You must designate an individual o
The Limited Liability Compan	ry cannot serve as its own Re active Florida registration.) (address of the registered ag	egistered Agent." gent are:	nt's Signature: You must designate an individual of
The Limited Liability Compan nother business entity with an	ry cannot serve as its own Re active Florida registration.) address of the registered at Ainsworth & Clancy, P.	egistered Agent. gent are:	nt's Signature: You must designate an individual of
The Limited Liability Compan nother business entity with an	ry cannot serve as its own Re active Florida registration.) address of the registered at Ainsworth & Clancy, P.	egistered Agent." gent are:	nt's Signature: You must designate an individual o
The Limited Liability Compan nother business entity with an	ry cannot serve as its own Re active Florida registration.) address of the registered at Ainsworth & Clancy, P.	egistered Agent, gent are: LLC Jame	nt's Signature: You must designate an individual o
The Limited Liability Compan nother business entity with an	ry cannot serve as its own Re active Florida registration.) I address of the registered ag Ainsworth & Clancy, P	egistered Agent, gent are: LLC Vame	You must designate an individual o
The Limited Liability Compan nother business entity with an	y cannot serve as its own Re- active Florida registration.)  t address of the registered ag  Ainsworth & Clancy, P.  801 Brickell Avenue, St	egistered Agent, gent are: LLC Vame	You must designate an individual o

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. Thereby 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 as provided for in Chapter 605, F.S..

(CONTINUED)

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

	BR" = Authorized Member	Name and Address:		
	R" = Manager GR	The Modd Group, LLC 1100 Brickell Bay Drive, #310747	_	
		Miami, FL 33231	_	
-			SEC!	2020 AUG
			HATI	AUG 2
			₹\$80 74,80	1
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(Use	attachment if necessary)		ָּיָח <u></u>	C
(If an effective the date of filir <u>Note:</u> If the d	date is listed, the date must be speci ig.)	filing:		
	Other provisions, if any,			
REO	URED SIGNATURE:	Vinna 12		
	am aware that any false in	her or an authorized representative of a member, in accordance with section 605,0203 (1) (b). Florida Statutes, formation submitted in a document to the Department of Stateslony as provided for in s.817,155, F.S.		
	John Ainsworth - Le	egal Representative		
	•	Typed or printed name of signee		
		Filing Foots		

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)