## L20000 334385

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PICK-UP	WAIT	MAIL
(Busi	iness Entity Name)	
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Certified Copies	Certificates of Stat	tus
Special Instructions to Fi	iling Officer:	

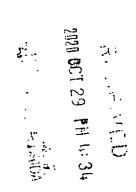
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,Advanced Incorporation	g Şervice
* *	1317 California Street Phone: 850-222-CORP P.O. Box 20396 Fax: 850-575-2724 Tallahassee, FL 32316 Email: orders@aisincfl.com Website: www.aisincfl.com
Godwin Pentry	
	FOR OFFICE USE ONLY
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Notes:	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must o	contain the words "Limite	d Liability Company,	"L.L.C.," or "LLC.")			
ARTICLE II - Address:	et uddenne of the configuration	l a CC a a a Cala a 1 de la cala	11 1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1	,		
The mailing address and stre	et address of the principal	office of the Limited	Liability Company is:			
<u>Prin</u>	cipal Office Address:		Mailing Addres	<u>s</u> :		
1515 Detrick Ave	2.					
Deland, FL 3272						
<del></del>	<del>-</del>					
(The Limited Liability Comp	any cannot serve as its ow	on Registered Agent. \	nt's Signature: You must designate an indiv	idual or		
(The Limited Liability Comp	any cannot serve as its ow an active Florida registrat	on Registered Agent. \ ion.)	nt's Signature: You must designate an indiv	idual or	2020 0	
ARTICLE III - Registered (The Limited Liability Comp another business entity with The name and the Florida stre	any cannot serve as its ow an active Florida registrat	on Registered Agent. \ ion.)	nt's Signature: You must designate an indiv	1 - 3 2 - 3 6 - 3	2020 OCT	<u>. J</u>
(The Limited Liability Comp another business entity with	any cannot serve as its ow an active Florida registrat cet address of the register	on Registered Agent. \ ion.)	nt's Signature: You must designate an indiv	idual or	2020 OCT 29	The state of the s
(The Limited Liability Comp another business entity with	any cannot serve as its ow an active Florida registrat cet address of the register	en Registered Agent. Vion.)  ed agent are:	nt's Signature: You must designate an indiv	1 - 3 2 - 3 6 - 3	29	
(The Limited Liability Comp another business entity with	any cannot serve as its ow an active Florida registrat cet address of the register Wayne Godwin 1515 Detrick Ave.	en Registered Agent. Vion.)  ed agent are:	You must designate an indiv	1 - 3 2 - 3 6 - 3	29 PH	
(The Limited Liability Comp another business entity with	any cannot serve as its ow an active Florida registrat cet address of the register Wayne Godwin 1515 Detrick Ave.	en Registered Agent. Vion.)  ed agent are:  Name	You must designate an indiv	1 - 3 2 - 3 6 - 3	29	

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

Wayne Godwin
Registered Agent's Signature (REQUIRED)

(CONTINUED)

## ARTICLE IV-

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

	Title:	Name and Address:	
	"AMBR" = Authorized Member		
	"MGR" = Manager		
	MGR	Wavne Godwin	
		1515 Detrick Ave.	
		Deland, FL 32724	
	MCB		
	MGR	Dolores Godwin 1515 Detick Ave.	
		Deland, FL 32724	
	<del></del>		
		<del></del>	
If an et he date <u>Note:</u>	Tective date is listed, the date must be of filing.)	date of filing:	
ARTIC	LE VI: Other provisions, if any.		
	REOUIRED SIGNATURE:		
	Wayne Go	dwin	
	This document is ex I am aware that any	a member or an authorized representative of a member. secuted in accordance with section 605.0203 (1) (b). Florida Statutes, false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.	
	Wavne Godw	vin	
	wavie Godw	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)