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PICK-UP WAIT MAIL						
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(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
5. 0"						
Special Instructions to Filing Officer						
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Office Use Only



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SECRETARY SECRETARY SECRETARY OF STATE TALLAHASSEE, FL

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#### **CORPORATE**

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INC.

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

#### WALK IN

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х	X	FILING	LLC				
1.		REEL BLONDE LLC					
		(CORPORATE NAME AND DOCUMEN	IT #)				
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#### **COVER LETTER**

TO: New Filing Section Division of Corporations						
SUBJECT: Reel Blonde LLC						
Name of Limited Liability	у Сотралу					
The enclosed Articles of Organization and fee(s) are submitted f	or filing.					
Please return all correspondence concerning this matter to the fo	Howing:					
Brittany Osburg	Person					
•						
Firm/Company						
2107 W COSS St Scite A						
Tampa, FL 3360 City/State and Britany @ distribution E-mail address: (to be used for future and	njoint.com					
For further information concerning this matter, please call:						
Bri Hany Osbarn at (734) Name of Person Area Code	652-7375  Daytime Telephone Number					
Enclosed is a check for the following amount:						
Certificate of Status Certified	S160.00 Filing Fee, d Copy certificate of Status & Certified Copy (additional copy is enclosed)					
	Street Address					
~	New Filing Section					
	Division of Corporations Clifton Building					
	2661 Executive Center Circle					

Tallahassee, Fl. 32301

## FILED

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	2020 NOV -4 PM 2: 32		
The name of the Limited Liability Company is:  Reel Blonde LLC  (Must contain the words "Limited Liability Contain the words")	SECRETARY OF STATE TALLAHASSEE, FL		
ARTICLE II - Address: The mailing address and street address of the principal office of the L	imited Liability Company is:		
Principal Office Address:	Mailing Address:		
2107 W Cass St	2107 W (ass 5t		
Tampa, FL 33606	Tampa, FC 33606		
(The Limited Liability Company cannot serve as its own Registered A another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  Britany Osby(A)  Name  2107 W Cass St  Florida street address (P.O. Box Florida street address (	Suite A  NOT acceptable)  33606  Zip		
Having heen named as registered agent and to accept service of process place designated in this certificate. I hereby accept the appointment as r further agree to comply with the provisions of all statutes relating to the am familiar with and accept the obligations of my position as registered	egistered agent and agree to act in this capacity. I proper and complete performance of my duties, and I		
Registered Agent's	Signature (REQUIRED)		

(CONTINUED)

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

S 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)