12000035589

(Requ	estor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only

24(1/2c)



500354447645

11/05/20--01021--020 **125.00

2038 NOV -5- AM 11: 4

COVER LETTER

TO:	New Filing Sec Division of Cor								
ciid ir	The Bles'd	Elect School of Mai	tter Acad	lemy					
SUBJE.	CT:	Name	of Limi	ted Liabil	ity Company				
The enc	closed Articles of	Organization and fe	e(s) are:	submitted	l for filing.				
Please r	return all correspo	ondence concerning	this matt	er to the	following:		: .	<u>ت</u>	
	Philetha Tuc	ker					- 1	MON BEEN	•
			-	Name of	Person		27	C)	ī
				11: 16:				<u> </u>	-
	4501 N. 200	h Stroot		Firm/Ce	ompany		# · ·	24 :IIIIII	
				Addı	ress				
	Tampa, FL 1	336 1D							
	letha1214@a	ol.com	Cit	y/State ar	nd Zip Code				
			e used f	or future	annual report notificati	ion)			
For furth	er information co	ncerning this matter	, please	call;					
	Philetha Tuc	ker	813 _at (270-5687				
	Nan	ne of Person			Daytime Telephon				
Enclose	ed is a check for t	he following amoun	t:						
≡ \$125	5.00 Filing Fee	□\$130.00 Filing Certificate of Sta		Certif	55.00 Filing Fee & ied Copy nal copy is enclosed)	□\$160.0 Certifica Certified (additional	ite of St l Copy	atus &	ed)
	New F Divisi P.O. F	ng Address Filing Section on of Corporations Box 6327 hassee, FL 32314			Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

<u>Prin</u>	cipal Office Address:		Mailing Ad	dress:	
1921 Green Stree	' I	1921	1 Green Street		
Tampa, FL 33607			pa, FL 33607		
The name and the Florida str	•	d agent are:		F _e #	ON FEE
he name and the Florida str	eet address of the registere Philetha Tucker	d agent are: Name		£ + + + + + + + + + + + + + + + + + + +	S- AON FEET
The name and the Florida str	•	·			
The name and the Florida stro	Philetha Tucker 4501 N. 20th Street	·	cceptable)	eg s	
he name and the Florida str	Philetha Tucker 4501 N. 20th Street	Name	eceptable)		19 NOV -5 KM 11: 12

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager AMBR Philetha Tucker 4501 N. 20th Street Tampa, FL 33610 AMBR Phyllis Tucker 1718 Arch Street Tampa, FL 33607	
AMBR Philetha Tucker 4501 N. 20th Street Tampa, FL 33610 AMBR Phyllis Tucker 1718 Arch Street	
4501 N. 20th Street	
AMBR Phyllis Tucker 1718 Arch Street	
AMBR Phyllis Tucker 1718 Arch Street	
1718 Arch Street	
1718 Arch Street	
4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	1 13 5 1 4 6 1 7 7 8
<u> </u>	
	Ç1
	<u> </u>
	
	.——خات
•	Lot.
EV: Effective date, if other than the date of filing:	ior to or 90 d
REQUIRED SIGNATURE:	
Signature of a member or an authorized representative of a member	
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Floric	da Statutes,
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florid I am aware that any false information submitted in a document to the Department	da Statutes.
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Floric	da Statutes,
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florid I am aware that any false information submitted in a document to the Department	da Statutes,

as

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)