

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L21000017267
FILED 8:00 AM
January 05, 2021
Sec. Of State
tscott

Article I

The name of the Limited Liability Company is:
NICOLE HALEY ENTERPRISES LLC

Article II

The street address of the principal office of the Limited Liability Company is:
5448 PONCE DE LEON BLVD
SEBRING, FL. US 33872

The mailing address of the Limited Liability Company is:
5448 PONCE DE LEON BLVD
SEBRING, FL. US 33872

Article III

Other provisions, if any:
COMMISSION SALES

Article IV

The name and Florida street address of the registered agent is:
ZACHARY L KAMISH
11268 WINTHROP MAIN ST
STE 102B
RIVERVIEW, FL. 33578

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.

Registered Agent Signature: ZACHARY KAMISH

Article V

The name and address of person(s) authorized to manage LLC:

Title: MGR
NICOLE HALEY
5448 PONCE DE LEON BLVD
SEBRING, FL. 33872 US

Title: MGR
DREW M HALEY
5448 PONCE DE LEON BLVD
SEBRING, FL. 33872 US

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Article VI

The effective date for this Limited Liability Company shall be:

01/01/2021

Signature of member or an authorized representative

Electronic Signature: NICOLE HALEY

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.