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## COVER LETTER

**New Filing Section** 

TO:

Division of Corporations
SUBJECT: Mary b's Tees+more LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mary Brown Name of Person
Mary Bistees & more Firm/Company
7485 Hardaway Highway
Chattahoochee F1 32324 City/State and Zip Code marybstees@yahoo.com
marybstees ayahoo.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mary Brown at (850) 1694-1652  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐\$130.00 Filing Fee & ☐\$155.00 Filing Fee & ☐\$160.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)  ☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address  New Filing Section  Street Address  New Filing Section Division

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ICLE I - Name:

name of the Limited Liability Company is:		
Marybs tees + more LLC  (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")		
ICLE II - Address: nailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
Chattahoochee F1 32324 Same		
ICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or her business entity with an active Florida registration.)	7021 FEB	
name and the Florida street address of the registered agent are:	834	·
Mary Brown	21,	
Florida street address (P.O. Box NOT acceptable)	P11 12: 49	
City State Zip	-	

g been named as registered agent and to accept service of process for the above stated limited liability company at the lesignated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I niliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

(CONTINUED)

Market Registered Agent's Signature (REQUIRED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager AMBR AMBR\_\_\_ (Use attachment if necessary) \_\_\_\_. (OPTIONAL) RTICLE V: Effective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after e date of filing.) ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as e document's effective date on the Department of State's records.

RTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Brown Mary Brown
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)