

3/15/2021

Division of Corporations

## Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

**L210001033143**

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## To:

Division of Corporations  
Fax Number : (850)617-6381

## From:

Account Name : LEGALZOOM.COM INC.  
Account Number : I20010000062  
Phone : (323)962-8600  
Fax Number : (323)962-3889

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Email Address: \_\_\_\_\_

## FLORIDA LIMITED LIABILITY CO.

## Fatboi's Cuts LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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3/16/21

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Fatboy's Cuts LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:Mailing Address:5750 NW 55th AveOcala, Florida 34482

## ARTICLE III - Registered Agent, Registered Office, &amp; Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

United States Corporation Agents, Inc.Name5575 S Semoran Blvd, Suite 36Florida street address (P.O. Box **NOT** acceptable)OrlandoFlorida32822CityStateZip

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 ~~his~~ 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~~ **Chapter** 605, FS.

  
\_\_\_\_\_  
Registered Agent's Signature **(REQUIRED)**

(CONTINUED)

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