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	(Requestor's Name)	, <u></u>
	(Address)	
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	(City/State/Zip/Phone #)	
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	(Business Entity Name)	-
	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instruction	; to Filing Officer	

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Cassidy Subscription Services LLC Art of Inc. File LTD Partnership File Foreign Corp. File LC. File Fictitious Name File Trade/Service Mark Merger File Att. of Annual File RA Resignation Dissolution/Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Cop Record Search Officer Search Fictitious Search Fictitious Search Fictitious Owner Search Priving Record Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval	
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UCC 11 Retrieval	
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COVER LETTER

	New Filing Section Division of Corpo				
		cription Services	LLC		
SUBJEC	T:	Name	of Limited Liab	ility Company	•
The enclo	osed Articles of O	rganization and fe	e(s) are submitte	d for filing.	
Please ret	turn all correspon	dence concerning	this matter to the	following:	
	Richard E. Str	aughn			
			Name	of Person	
	Straughn & Ti	umer, P.A.			
			Firm/	Company	
	255 Magnolia	Avenue SW			
			Ad	idress	-
	Winter Haven	, FL 33880			
			City/State	and Zip Code	
	E	-mail address: (to	be used for futur	e annual report notification	on)
For furthe	er information cor	ncerning this matte	er, please call:		
	Richard E. St	raughn	863	293-1184	
	Name	e of Person	Area Cod	e Daytime Telephone	e Number
Enclose	ed is a check for the	he following amou	int:		
	5.00 Filing Fee	□\$130.00 Filir Certificate of S	ig Fee & 🔲:	\$155.00 Filing Fee & raified Copy tional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisi P.O. E	ng Address Filing Section on of Corporation Box 6327 nassee, FL 32314	s	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

•	50
2021 HAY -4	AK 11: 05
SECTION (STATE

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cassidy Subscription Services LLC

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

ARTICLE II - Address:

The ma

<u>Principal</u>	Office Address:		Mailing Address:
346 E Central Avenue		3	46 E Central Avenue
Winter Haven, FL 3388	30	<u>v</u>	Vinter Haven, FL 33880
mother business entity with an ac	tive Florida registratio	n.)	nt. You must designate an individual c
mother business entity with an ac	tive Florida registration	n.)	
mother business entity with an ac	tive Florida registratio	n.)	
mother business entity with an ac	tive Florida registration	n.) l agent are: Name	
mother business entity with an ac	tive Florida registration didress of the registered Richard E. Straughn	n.) I agent are: Name	
mother business entity with an ac	ddress of the registered Richard E. Straughn 255 Magnolia Avenu	n.) I agent are: Name	

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 as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

	La.
'AMBR" = Authorized Mem	DCT
"MGR" = Manager	
<u>MGR</u>	Albert B. Cassidy 346 E Central Avenue
	Winter Haven, FL 33880
	Willer Havell, 1 & 23000
) (CD	Steven Cassidy
MGR	346 E Central Avenue
	Winter Haven, FL 33880
	العامل العامل
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(Use attachment if necessary)
EV: Effective date, if other tective date is listed, the date	than the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 9
E V: Effective date, if other tective date is listed, the date of filing.) 'the date inserted in this blockment's effective date on the	than the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 9 k does not meet the applicable statutory filing requirements, this date will n Department of State's records.
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E V: Effective date, if other tective date is listed, the date of filing.) The date inserted in this blockment's effective date on the LE VI: Other provisions, if any Signa This docum I am aware constitutes	than the date of filing:

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

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

\$ 30.00 Certifled Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)