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COVER LETTER

COVER LETTER	201/APR -2 PH 1:31
TO: New Filing Section Division of Corporations	STAPS TONY
Division of Corporations	Pir
SUBJECT: BARRY PITTER BA	1.31
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:	
BAKRY PITTER	
Name of Person	
BARRY PITTER LIC	
Firm/Company	
5282 GREY BIRCH LN	
Address	
BOYNTON BEACH, FL 33437 City/State and Zip Code	
PITTERBARRY@GAAIL.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Plane and the second se	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	Filing Fee, of Status & opy opy is enclosed)

Mailing Address

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

Street Address

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

ARTICLE I - Name: The name of the Limited Liability Company is:		7 ; ;
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	2021 APR 1-2	Fii 1:31
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	•	
Principal Office Address: Mailing Add	lress:	
5282 GKEY BURCHLN SAME BOYNTON BENCH FL 33472		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an in another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: BRRY PITTER Name	ndividual or	
Florida street address (P.O. Box NOT acceptable)		
BOYNTON BEACH FL 33437 City State Zip		
Having been named as registered agent and to accept service of process for the above stated limited lial place designated in this certificate. I hereby accept the appointment as registered agent and agree to act further agree to comply with the provisions of all statutes relating to the proper and complete performar am familiar with and accept the obligations of my position as registered agent as provided for in Chapte	in this capacity. I ace of my duties, an	
Registered Agent's Signature (REQUIRED)		

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Me	Name and Address;
"MGR" = Manager	
MGR	BARRY PITTER 5282 GREY BIRCH LN BOYNTON BEACH, FL 33437
(Use attachment if necessar	y)
If an effective date is listed, the date the date of filing.) Note: If the date inserted in this blothe document's effective date on the ARTICLE VI: Other provisions, if an	y.
<u>REOUIRED</u> SIGNATUR	E:
This docum I am aware	nture of a member or an authorized representative of a member, ment is executed in accordance with section 605.0203 (1) (b). Florida Statutes, that any false information submitted in a document to the Department of State in third degree felony as provided for in s.817.155, F.S.
	BARRY PITTER
	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)