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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
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53/18/21

COVER LETTER

	New Filing Sect Division of Cor					
SUBJEC	Iella "LLC"					
SOBJEC	- 1		e of Limited Liab	ility Company		
The encl	osed Articles of	Organization and f	ee(s) are submitte	ed for filing.		
Please re	turn all correspo	ndence concerning	this matter to the	e following:		
	Sheila DiFilli	рро				
			Name	of Person		
	Iella "LLC"					
			Firm/C	Company		
	24519 Sunris	e Drive				
			Ad	dress		
	Port Charlotte	e, FI 33980				
	chell225@veri	zon.net	City/State a	and Zip Code		
	E	-mail address: (to	oe used for future	annual report notification	on)	
For further	r information cor	cerning this matte	r, please call:			
	Sheila DiFilli	рро	401 at (793-1220		
	Name	of Person		Daytime Telephone	Number	
Enclosed	l is a check for th	e following amour	Œ.			
	00 Filing Fee	\$130.00 Filing Certificate of Sta	Fee & □\$1	55.00 Filing Fee & ified Copy onal copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	New Fi Divisio P.O. Bo	z Address ling Section n of Corporations ox 6327 ssee, FL 32314		Street Address New Filing Section Div The Centre of Tallaha. 2415 N. Monroe Stree Tallahassee, FL 32303	ssee ASSE 3 P	17

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

fella "LLC"			
(Must contain	n the words "Limited L	liability Comp	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address:			
he mailing address and street add	ress of the principal of	fice of the Lir	nited Liability Company is:
Principal	Office Address:		Mailing Address:
24519 Sunrise Drive			24519 Sunrise Drive
Port Charlotte, Fl 33980	0		Daw Charletta El 22090
ARTICLE III - Registered Agent	t, Registered Office, &	Registered Ag	Agent's Signature: ent. You must designate an individual
ARTICLE III - Registered Agent The Limited Liability Company can nother business entity with an act	t, Registered Office, & annot serve as its own tive Florida registration	Registered Ag n.)	Agent's Signature:
ARTICLE III - Registered Agent The Limited Liability Company canother business entity with an act The name and the Florida street ad-	t, Registered Office, & annot serve as its own tive Florida registration	Registered Ag n.)	Agent's Signature:
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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)

21 APR 13 PM 8: 47

ARTICLE IV-

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

24519 Sunrise Drive Port Charlotte, FL 33980 V: Effective date, if other than the date of filing: (OPTIONAL) vice date is listed, the date must be specific and cannot be more than five business days prior to or 90 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be not seffective date on the Department of State's records. VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance will 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. Sheila DiFillippo Typed or printed name of signee Filing Fees: 1225.00 Filing Fee for Articles of Organization and Designation of Registered Agent		Name and Address:
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