

5/26/2021

**L21000 249904**

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

From:

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Account Number : 07535000541  
Phone : (813)875-1333  
Fax Number : (813)200-1050

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: cbrooks1992@gmail.com

**FLORIDA LIMITED LIABILITY CO.  
C E Brooks Holdings LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
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**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I**

**Name and Address**

The name of this Limited Liability Company is:

**C E Brooks Holdings LLC**

The mailing address and street address of the Limited Liability Company are:

**559 Red Oak Drive  
Waverly Hall, GA 31831**

**ARTICLE II**

**Term of Existence**

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

**ARTICLE III**

**Purpose and Powers**

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

**ARTICLE IV**

**Powers**

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

\_\_\_\_\_  
This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 13046 Race Track Road, Suite 131, Tampa, FL 33626, 813-875-1333.

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**ARTICLE V**  
**Initial Registered Office and Agent**

The street address of the initial registered office of this Limited Liability Company is:

**13046 Race Track Road 131**  
**Tampa, FL 33626**

and the name of its registered agent at such address is:

**CourtAccess Centers of America Inc**

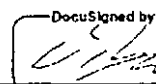
**ARTICLE VI**  
**Management**

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

**Name and Address**

**Collin Brooks, Authorized Member**  
**559 Red Oak Drive**  
**Waverly Hall, GA 31831**

Dated: Wednesday, May 26, 2021

DocuSigned by:  


Collin Brooks, Authorized 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.**

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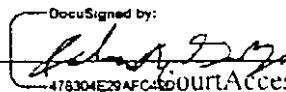
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**ACCEPTANCE BY REGISTERED AGENT**

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..

Date: May 26, 2021

DocuSigned by:  
  
478304E29AFC48040URTAccess Centers of America Inc

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