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COVER LETTER

| | w Filing Section vision of Corporations | |
|---------------------|---|---|
| SUBJECT: | Lee Dailey Management | |
| SUBJECT | | aited Liability Company |
| The enclose | d Articles of Organization and fee(s) are | submitted for filing. |
| Please return | n all correspondence concerning this ma | tter to the following: |
| | Brittany Dailey | |
| • | | Name of Person |
| | Lee Dailey Management | |
| | | Firm/Company |
| | 12464 Blackwater Ct | |
| , | | Address |
| | Jacksonville, FL 32223 | |
| | | ity/State and Zip Code |
| <u> </u> | LeeDaileyMgmt@gmail.com F-mail address: (to be used | for future annual report notification) |
| Francisco (n. 1888) | | · |
| rot tutmer in | formation concerning this matter, please | cuit. |
|] | · · · · | 904) 962-5767 rea Code Daytime Telephone Number |
| | Name of Person A | rea code Daytine reichione Number |
| Enclosed is | a check for the following amount: | |
| □\$125.00 | Filing Fee S130.00 Filing Fee & Certificate of Status | □\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Address | Street Address |
| | New Filing Section Division of Corporations | New Filing Section Division The Centre of Tallahassee |
| | P.O. Box 6327 Tallahassee, FL 32314 | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |
| | rananassee, rl. 52514 | Fallaliassec, FL 52505 |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability | Company is: | | |
|--|--------------------------|-----------------------------------|--|
| Lee Dailey Manageme | | | |
| (Must conta | in the words "Limited | Liability Company, | "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street ad | dress of the principal c | office of the Limited | Liability Company is: |
| <u>Principa</u> | l Office Address: | | Mailing Address: |
| 12464 Blackwater Ct Jacksonville, FL 3222 | 3 | | |
| ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ac | eannot serve as its owr | Registered Agent. Y | nt's Signature: You must designate an individual or |
| The name and the Florida street a | ddress of the registere | d agent are: | |
| | Brittany Dailey | | |
| | | Name | |
| | 12464 Blackwater C | | |
| | Florida street addres | ss (P.O. Box <u>NOT</u> ac | eceptable) |
| | Jacksonville | FL | 32223 |
| | City | State | Zip |

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)

ARTICLE IV-

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

| "MGR" = Manager MGR Brittany Daile 12464 Blackw Jacksonville, (Use attachment if necessary) CLE V: Effective date, if other than the date of filing: 06/06/25 ffective date is listed, the date must be specific and cannot e of filing.) If the date inserted in this block does not meet the applicable cument's effective date on the Department of State's records. CLE VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member or an author This document is executed in accordance | er Ct | |
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| constitutes a third degree felony as provide | zed representative of a member. h section 605.0203 (1) (b), Florida Statuted in a document to the Department of St | tes. |
| Brittany Dailey Typed or printe | zed representative of a member. h section 605.0203 (1) (b), Florida Statuted in a document to the Department of St | tes. |

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)