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## **COVER LETTER**

	ew Filing Sectivision of Co.						
cubir <i>c</i> a		maid Investments. LLC			•		
SUBJECT	•	Name of	Limited Lia	bility Company			
The enclos	ed Articles of	Organization and fee(s)	are submitt	ed for filing.			
Please retu	rn all corresp	ondence concerning this	matter to th	e following:			
	Heather Fos	ler					
			Name	of Person			
							<del></del>
			Firm/	Company		•	
	1081B Farra	gut Road					
			Ad	ldress			
	Key West, F	lorida 33040			<u> </u>		
	surlymermaid	llc@gmail.com	City/State	and Zip Code		EUR LUA	<u> </u>
•			sed for futur	e annual report notificat	ion)	**************************************	<u>₹</u> -
For further is	nformation co	neerning this matter, ple	ease call:			AQ Mga	21 At
	Heather Fost	er al	559	940-4033			AR 4: 5
	Nan	e of Person	Area Code	Daytime Telephon	e Number		~
Enclosed is	s a check for t	he following amount:					
□\$125.00	Filing Fee	■\$130.00 Filing Fee Certificate of Status	Cert	155.00 Filing Fee & ified Copy onal copy is enclosed)		• •	: &
		g Address iling Section		Street Address New Filing Section Di	ivision		
	Divisio P.O. B	on of Corporations ox 6327 assec, FL 32314		The Centre of Tallahi 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Surly Mermaid	Investments, LLC			
(Mus	t contain the words "Limited	Liability Company, "	L.L.C.," or "LLC.")	
ARTICLE II - Address: 'he mailing address and st	reet address of the principal o	office of the Limited I	iability Company is:	
Pr	Principal Office Address:		Mailing Address:	
	1081B Farragut Rd		1200 Fourth Street #1111	
Key West Flor	rida 33040	Key V	Vest Florida 33040	
The Limited Liability Con nother business entity wit	d Agent, Registered Office, appany cannot serve as its own than active Florida registration atreet address of the registered Heather Foster	n Registered Agent. Yeon.)	's Signature: ou must designate an individua	l or
The Limited Liability Con nother business entity wit	npany cannot serve as its own h an active Florida registration street address of the registered	n Registered Agent. Yeon.)		l or
The Limited Liability Con nother business entity wit	npany cannot serve as its own h an active Florida registration street address of the registered	n Registered Agent. Yoon.) d agent are: Name		l or
The Limited Liability Con nother business entity wit	npany cannot serve as its own han active Florida registration street address of the registered Heather Foster  1081B Farragut Roa	n Registered Agent. Yoon.) d agent are: Name	ou must designate an individua	l or
The Limited Liability Con nother business entity wit	npany cannot serve as its own han active Florida registration street address of the registered Heather Foster  1081B Farragut Roa	n Registered Agent. Yoon.) d agent are: Name	ou must designate an individua	l or
The Limited Liability Con another business entity wit The name and the Florida s	mpany cannot serve as its own than active Florida registration at rectangular extreet address of the registered Heather Foster  1081B Farragut Roal Florida street address Key West City	n Registered Agent. Yeon.) d agent are:  Name d ss (P.O. Box NOT ace Florida State	ou must designate an individua	

(CONTINUED)

## ARTICLE IV-

. . . .

· · . ..

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

• - -,

Title:	Name and Address:	
"AMBR" = Authorized Me "MGR" = Manager	mber	
AMBR	Heather Foster	
	1081B Farragut Rd Kev West Florida 33040	
<u>MGR</u>	Derek Foster 1081 B Farragut Rd	
	Key West, FL 33040	
(Use attachment if necessary	v)	
the date of filing.)	e must be specific and cannot be more than five business days prior to or 90 da ck does not meet the applicable statutory filing requirements, this date will not be	•
ARTICLE VI: Other provisions, if an	y.	<del></del>
REQUIRED SIGNATURI	ef a di di	<del></del> 
4	Va the Later	
	ture of a member or an authorized representative of a member.	
This docum I am aware i	nent 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.	
	a third degree felony as provided for in s 817 155 F.S.	-
<u>Heat</u>	ther Foster	$-\frac{\eta}{2}$
	Typed or printed name of signee	
orgeno som som som som som som som som som so	Filing Fees:	177
\$125.00 Filing Fee for Ar \$ 30.00 Certified Copy (	Optional)	
\$ 5.00 Certificate of Sta	· · · · · · · · · · · · · · · · · · ·	