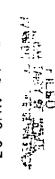
(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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07/13/21--01017--003 **125.00



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Mark Becke			
(Must	contain the words "Limited I	Liability Company,	`L.L.C.,`` or "LLC.``)	
RTICLE II - Address: ne mailing address and stre	eet address of the principal o	office of the Limited	Liability Company is:	
<u>Pri</u>	ncipal Office Address:		Mailing Address:	
4013 Wi	indtree Dr.		4013 Windtree Dr. Tampa, Fl. 33624	
Tampa,	H1. 33624			
ne Limited Liability Comp other business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration and address of the registered	n Registered Agent. ' on.) d agent are: Mark Becker	at's Signature: You must designate an individual or	
he Limited Liability Comp other business entity with	pany cannot serve as its own an active Florida registration	n Registered Agent. Yon.) d agent are: Mark Becker Name		
he Limited Liability Compother business entity with	pany cannot serve as its own n an active Florida registration freet address of the registered	n Registered Agent. 'on.) d agent are: Mark Becker Name	You must designate an individual or	
he Limited Liability Compother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered 4013 Win	n Registered Agent. 'on.) d agent are: Mark Becker Name	You must designate an individual or	
he Limited Liability Compother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered 4013 Win Florida street address	n Registered Agent. Von.) d agent are: Mark Becker Name adtree Dr. ss (P.O. Box NOT ac	You must designate an individual or	

(CONTINUED)

<u>Title:</u> "AMBR" = "MGR" = M		Member	Name and Address:
		-	
		-	
 			
(Use attachn	ent if necess	sary)	
CLE V: Effecti effective date is te of filing.) If the date inse	ve date, if oth listed, the d	ner than the datalate must be spolock does not	meet the applicable statutory filing requirements, this date will not be li-
CLE V: Effecti effective date is te of filing.) If the date inse	we date, if our listed, the direction this to the direction the direction the direction to the date on the date of	ner than the dat late must be spolock does not the Department	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days meet the applicable statutory filing requirements, this date will not be list of State's records.
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CLE V: Effective date is te of filing.) If the date insecument's effect	ve date, if oth listed, the direction this to the direction to the directi	ner than the dat late must be spolock does not the Department any.	pecific and cannot be more than five business days prior to or 90 days meet the applicable statutory filing requirements, this date will not be list of State's records.
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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)