

(Re	equestor's Name)			
(Address)				
(Ad	Idress)			
(Cit	ty/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only

OCT 0 6 2021

T. SCOTT



800374154708

10/01/21--01023--004 **125.00



COVER LETTER

0.1.0.1.1.0.00		F	lailey First	LLC	
SUBJECT: _	Name of Limited Liability Company				
The enclosed	Articles of	Organization and fee(s) are	e submitted	for filing.	
Please return a	ll correspo	ondence concerning this ma	itter to the fo	ollowing:	
			Blakely Mo	ore, Esq.	
_			Name of	Person	
		Gainesvill	le Tax, Trus	, and Estate Low	
			Firm/Cor	npany	
		2233 NW 4	41 St., Suite	400-C	
			Addre	SS	
		Gaines	ville, FL 326	506	
			ity/State and	•	
		····		glemail.com	
	Е	E-mail address: (to be used	for future a	mual report notificati	on)
For further infor	mation co	ncerning this matter, please	e call:		
	Blakely Moore		352	554-5576	5
			rea Code	ea Code Daytime Telephone Number	
Enclosed is a c	heck for th	ne following amount:			
■\$125.00 Fil	ing Fee	□\$130.00 Filing Fee & Certificate of Status	Certifie	.00 Filing Fee & d Copy I copy is enclosed)	CIS160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations

Street Address
New Filing Section Division
The Centre of Tallahassee

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED HABILITY COMPANY

	Haile	ev First LLC	
(Must contain	the words "Limited I	Liability Company,	"L.L.C.," or "LLC.")
RTICLE II - Address:			
e mailing address and street addre	ess of the principal of	ffice of the Limited	Liability Company is:
Principal C	Office Address:		Mailing Address:
1022 NW 42nd Dr			1022 NW 42nd Dr
	Gainesville, FL 32605		
Gainesvill TICLE III - Registered Agent, te Limited Liability Company car	Registered Office, onto serve as its own	Registered Agent.	Gainesville, FL 32605 at's Signature: You must designate an individual
Gainesvill CTICLE III - Registered Agent, ne Limited Liability Company car other business entity with an acti-	Registered Office, onnot serve as its own va Fiorida registration	Registered Agent. '	nt's Signature:
Gainesvill CTICLE III - Registered Agent, the Limited Liability Company car other business entity with an acti-	Registered Office, on the serve as its own we Fierida registration ress of the registered	Registered Agent. ' agent are: Man Lee	nt's Signature:
	Registered Office, on the serve as its own we Fierida registration ress of the registered	Registered Agent. (m.) agent are:	nt's Signature:
Gainesvill CTICLE III - Registered Agent, the Limited Liability Company car other business entity with an acti-	Registered Office, on the serve as its own we Florida registration ress of the registered	Registered Agent. ' agent are: Man Lee	nt's Signature:
Gainesvill CTICLE III - Registered Agent, the Limited Liability Company can other business entity with an acti- tic name and the Florida street add	Registered Office, on the serve as its own we Florida registration ress of the registered	Registered Agent. (ch.) agent are: if Man Lee Name NW 42nd Dr	nt's Signature: You must designate an individual
Gainesvill CTICLE III - Registered Agent, the Limited Liability Company can other business entity with an acti- tic name and the Florida street add	Registered Office, anot serve as its own wa Fiorida registration ress of the registered He	Registered Agent. (ch.) agent are: if Man Lee Name NW 42nd Dr	it's Signature: You must designate an individual

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)

21의 OCT - 1 AM 11: 45

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	HEI MAN LEE
	1022 NW 42nd Dr. Gainesville, FL 32605
	Gamesyme, 1 E 32003
AMBR	Chun nin wong
·	1022 NW 42 nd Br.
	Gainesville, FL 32405
(Use attachment if necessary)	
the date of filing.)	e of filing:
ARTICLE VI: Other provisions, if any,	
REQUIRED SIGNATURE:	Cll Khi Um
This document is execu I am aware that any fals	tember or an authorized representative of a member. atted in accordance with section 605.0203 (1) (h), Florida Statutes the information submitted in a document to the Department of State te felony as provided for in s.817.155, F.S.
	HEI MAN LEE
	HEI MAN LEE Typed or printed name of signee

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)