# Florida Department of State

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## FLORIDA LIMITED LIABILITY CO. **CULLENS CREATIONS, LLC**

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## ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - NAME

The name and address of this Limited Liability Company shall be:

Cullens Creations, LLC

ARTICLE II - ADDRESS

561 S.W 101<sup>st</sup> Avenue Plantation, FL 33324

ARTICLE III - NAME OF REGISTERED AGENT, ADDRESS OF REGISTERED OFFICE: AND REGISTERED AGENT'S SIGNATURE

The name and street address of the L.L.C.'s initial registered resident agent shall be:

Rachel Marie Cullen 561 S.W 101<sup>st</sup> Avenue Plantation, FL 33324

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 provisio ns 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

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#### ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is; therefore, a managermanaged company.

> Rachel Marie Cullen "MGR" 100 % 581 S.W 101<sup>st</sup> Avenue Plantation, FL 33324

ARTICLE V - MANAGEMENT

Effective date November 22,2021

Signature of a member or an authorized representative of a member.

(In accordance with section 605.02.03(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Printed name of signature