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SECRETARY OF STATE

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COVER LETTER

	ew Filing Sectivision of Cor				
SUBJECT		ct Marketing			
SUBJECT	•	Name of Lin	nited Liabi	ity Company	
The enclos	sed Articles of	Organization and fee(s) are	e submitted	l for filing.	
Please retu	ım all correspo	ndence concerning this ma	atter to the	following:	
	Randy Rauch	ı			
			Name of	Person	
	FLA Product	Marketing			
			Firm/Co	mpany	
	533 Gatlin A	ve.			
			Addı	ess	
	Orlando, FL	32806			
			ity/State ar	d Zip Code	
-		eting@gmail.com -mail address: (to be used	for future	innual report notificat	ion)
For further is	nformation cor	cerning this matter, please	call:		
	Randy Rauch	40 at (17	443-5552	
	Name	· · · · · · · · · · · · · · · · · · ·	rea Code	Daytime Telephon	ne Number
Enclosed is	s a check for th	e following amount:			
≣\$125.00	Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Address		Street Address	
		ling Section n of Corporations		New Filing Section D The Centre of Tallah	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A DT	ΓICI	C 1	1 1	u -	
AK		4E I	- 1	78	me:

The name of the Limited Liability Company is:

2022 JAN -3 AM 10: 23

SECRETARY OF STATE TALLAHASSEE, FL

FLA Product Marketing LLC.

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

<u>Princi</u>	pal Office Address:		Mailing Address: 2423 S. Orange Ave.	
2423 S. Orange Av	e.	2423		
#137			#137	
Orlando, FL 32806	-	Oral	ndo, FL 32806	
ousiness entity with an	t address of the registered	n.)	You must designate an individual	
ousiness entity with an	active Florida registratio	n.) I agent are:	Y ou must designate an individual	
usiness entity with an	active Florida registration t address of the registered	n.)	Y ou must designate an individual	
usiness entity with an	active Florida registration t address of the registered	n.) I agent are:	Y ou must designate an individual	
usiness entity with an	active Florida registration t address of the registered Randy Rauch	n.) I agent are: Name		
usiness entity with an	t address of the registered Randy Rauch 533 Gatlin Ave.	n.) I agent are: Name		

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:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Dandy Daugh
AMBK	Randy Rauch 2423 S. Orange Ave. #137
	Orlando, FL 32806
	<u> </u>
	문화 상
	<u> </u>
	SOF A
(Use attachment if necessary)	FALLAHASSEE, FL
,	F T
ICLE V: Effective date, if other than the da	ate of filing: (OPTIONAL)
ate of filing.)	specific and cannot be more than five business days prior to or 90 days a of meet the applicable statutory filing requirements, this date will not be list ent of State's records.
REQUIRED SIGNATURE:	ans more must
	member or an authorized representative of a member.
This document is exec	ocuted in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any fa	alse information submitted in a document to the Department of State
	gree felony as provided for in s.817.155, F.S.
Randy Rauch	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)