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	(Requestor's Name)	
	/Address	
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	(City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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	(Business Entity Name)	
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COVER LETTER

	ew Filing Sectivision of Co				
SUBJECT	: Rawson	Enterprises, LLC			
		Name of Li	mited Liabilii	y Company	
The enclose	ed Articles of	Organization and fee(s) a	re submitted	for filing.	
Please retu	m all corresp	ondence concerning this m	natter to the fo	llowing:	
	Lisa Lou	ise Rawson			
			Name of l	Person	
	Rawson 6	Enterprises, LLC			
			Firm/Con	прапу	
	2044 Can	nbridge Park	· - · · · · · · · · · · · · · · · · · · ·		
			Addre	SS	
	Gulf Breez	e, FL 32563			
	lisarawso) n888@gmail.com	City/State and	Zip Code	
_		E-mail address: (to be used	d for future ar	nual report notificati	on)
For further in	iformation co	ncerning this matter, pleas	se call:		
	Lisa Louis	se Rawson	850	982-8736	
·	Nam	ne of Person	Area Code	Daytime Telephon	e Number
Enclosed is	a check for t	he following amount:			
⊠\$125.00	Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certifie	00 Filing Fee & d Copy copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address			treet Address	.vision	
New Filing Section Division of Corporations			New Filing Section Division The Centre of Tallahassee		
P.O. Box 6327			415 N. Monroe Stree		
Tallahassee, FL 32314 Tallahassee, FL 32303			3		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE I - Name: he name of the Limited Liability	y Company is:			
Rawson Enterp	rises, LLC			
(Must conta	in the words "Limited I	Liability Compar	19, "L.L.C" or "LLC.")	
RTICLE II - Address:				
he mailing address and street ad	ldress of the principal o	ffice of the Limit	ted Liability Company is:	
<u>Principa</u>	Principal Office Address:		Mailing Address:	
2044 Cambridge Park			2044 Cambridge Park	
2044 Cambridge Pa	ark		2011 Cambridge Lark	
Gulf Breeze, FL 325 RTICLE III - Registered Age the Limited Liability Company	nt, Registered Office, cannot serve as its own	Registered Ager	Gulf Breeze, FL 32563	
RTICLE III - Registered Age the Limited Liability Company other business entity with an action of the company o	nt, Registered Office, ocannot serve as its own ctive Florida registration	Registered Ager n.)	Gulf Breeze, FL 32563 gent's Signature:	
Gulf Breeze, FL 325	nt, Registered Office, ocannot serve as its own ctive Florida registration	Registered Ager n.) agent are:	Gulf Breeze, FL 32563 gent's Signature:	
RTICLE III - Registered Age the Limited Liability Company other business entity with an action of the company o	nt, Registered Office, ocannot serve as its own ctive Florida registration ddress of the registered	Registered Ager n.) agent are:	Gulf Breeze, FL 32563 gent's Signature:	
RTICLE III - Registered Age the Limited Liability Company other business entity with an action of the company o	nt, Registered Office, ocannot serve as its own ctive Florida registration ddress of the registered	Registered Ager n.) agent are: son Name	Gulf Breeze, FL 32563 gent's Signature:	
RTICLE III - Registered Age the Limited Liability Company other business entity with an action of the company o	nt, Registered Office, of cannot serve as its own etive Florida registration ddress of the registered Lisa Louise Raw	Registered Ager n.) agent are: son Name Park	Gulf Breeze, FL 32563 gent's Signature: It. You must designate an individual or	
RTICLE III - Registered Age the Limited Liability Company other business entity with an action of the company o	nt, Registered Office, a cannot serve as its own ctive Florida registration ddress of the registered Lisa Louise Raw	Registered Ager n.) agent are: son Name Park	Gulf Breeze, FL 32563 gent's Signature: It. You must designate an individual or	

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)

2022 MAR -4 PH 4: 42
SEL

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Lisa Louise Rawson
	2044 Cambridge Park
	Gulf Breeze, FL 32563
(Use attachment if necessary)	
DTICLEW COLUMN 15 at all at	L. CCP
Experience date is listed, the date must be	date of filing:
ne date of filing.)	e specific and cannot be more than five business days prior to or 90 days after
	not meet the applicable statutory filing requirements, this date will not be listed a
ne document's effective date on the Departm	
•	
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE: /	
/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Signature of a	member or an authorized representative of a member.
	ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State
constitutes a third de	gree felony as provided for in s.817.155, F.S.
Lisa Louis	
	Typed or printed name of signee

as

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)