

L22000123615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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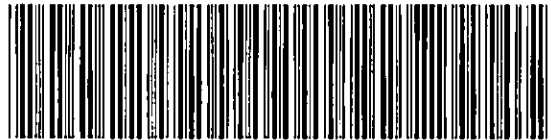
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 28 2022

COVER LETTER

TO: New Filing Section, Division of Corporations

SUBJECT: YELLOW BUS LABS, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing. Please return

all correspondence concerning this matter to the following:

M. Clifton Davenport V
1139 N. 18th St
LANETT, AL 36863
m.c.davenportv@gmail.com
(706) 773 4445

For further information concerning this matter, please call:

M. Clifton Davenport V, (706)773-4445

Enclosed is a check for the following amount:

☒ \$125.00
Filing Fee

☐ \$130.00
Filing Fee
&

Certificate of
Status

☐ \$155.00 Filing
Fee &

Certified Copy
(additional copy
is enclosed)

☐ \$160.00
Filing
Fee,

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of Status
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Copy

Mailing Address

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

Street Address

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

Articles of Organization
For a
Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:
YELLOW BUS LABS, LLC.

Article II

The street address of the principal office of the Limited Liability Company is:

**Yellow Bus Labs, LLC
14100 McCormick Drive
Tampa, FL 33626**

Article III

The mailing address of the Limited Liability Company is:

**Yellow Bus Labs, LLC
Attn: James L. Powers
14100 McCormick Drive
Tampa, FL 33626**

Article IV

The Purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article V

The name and Florida street address of the registered agent is:

**James L. Powers Jr.
14100 McCormick Drive
Tampa, FL 33626**

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.

Registered Agent Signature: _____

James L. Powers, Jr.

Article VI

The name and address of person(s) authorized to manage LLC:

**M. Clifton Davenport V, 1139 N. 18th Street, Lanett, AL 36863
Manager of Yellow Bus Labs, LLC**

Signature of Manager _____

M. Clifton Davenport V

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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