## L22000123927

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
<b>\</b> /	
PICK-UF	WAIT MAIL
	(0
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions (	to Filing Officer:

Office Use Only



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2022 MAR 25 PH 4: 26

## COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Be Better Consulting LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Curtis Edwirds Name of Person
Firm/Company
416 Creat Ad Letteharsec
Tallahassee FL 32305  City/State and Zip Code  Edwards Curtis 15 & Graff. Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$\Bigsis \text{3125.00 Filing Fee}\$ \text{Certified Copy}\$  Certificate of Status \text{Certified Copy} (additional copy is enclosed)  \$\Bigsis \text{3160.00 Filing Fee}\$ \text{Certified Copy} (additional copy is enclosed)
Mailing Address  New Filing Section  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 \$10  Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

	The Canada
ARTICLE I - Name: The name of the Limited Liability Company is:	2022 MAR 25 PM 1: 18
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	SEPTITION OF THE
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Add	ress:
Tilly nessee Pr 32305	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an in	ndividua! or

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

another business entity with an active Florida registration.)

Florida street address (P.O. Box NOT acceptable)

Talle horsel fl 32308

City State Zip

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)

Title:	n authorized to manage and control the Limited Liability Company:  Name and Address:	
"AMBR" = Authorized Member "MGR" = ManagerMKGR	Curtis Edinards  - Gilde Creek Rd  - Gilde Creek Rd  - 72705	
AMBIL	Curtis L Edwards	2022 H
	TO THE TENT OF THE	2022 MAR 25 PM 1: 11
(If an effective date is listed, the date must	e date of filing:	days after t be listed as
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:	of a member of an authorized representative of a member.	
This document is	of a member of an authorized representation (b), Florida Statutes executed in accordance with section 605.0203 (1) (b), Florida Statutes ny false information submitted in a document to the Department of Statid degree felony as provided for in s.817.155, F.S.	, e

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)