L22000132544

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

Office Use Only



100384930851

04/01/22--01028--004 **130.00

SECRETARY OF STATE FALLAHASSEE, FLORIDAGE

2022 MAR 31 PM 12: 38²⁰²² AFR - 1 AH

D. O'KEEFE APR - 1 2022

COVER LETTER

TO: New Filing Section Division of Corporations	·
SUBJECT: Ur Reviews Mo	Hity Company
The enclosed Articles of Organization and fee(s) are submitted. Please return all correspondence concerning this matter to the	
SUJATA TOR	of Person
Firm	/Company
314 FREEDOMS RI	
WINTER SPRINGS, City/State	1 6 4 Mail: a
E-mail address: (to be used for fur For further information concerning this matter, please call:	
SUJATA TORRES at (Ho	7) 221-5049 ode Daytime Telephone Number
LIST 25.00 Fitting Fee (2.5) Total	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certified Copy ditional copy is enclosed) □\$160.00 Filing Fee, Certified of Status & Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section Division of Corporations	Street Address New Filing Section Division The Centre of Taliahassee 2415 N. Monroe Street, Suite \$10

Tallahassee, FL 32303

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ur Reviews Matter LLC (Musi contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

SUJATA TORRES

Mailing Address:

314 FREEDOMS RING DR WINTER SPRINGS FL 32708

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

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

Principal Office Address:

314 FREEDOMS RING DR WINTER SPRINGS FL 32708

another business entity with an active Florida registration.)

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

ARTICLE 1 - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

	314 FRE	EDOMS R	1106	DR			
	Florida street addi	ress (P.O. Box <u>NOT</u>	ассершин	<i>:)</i>			
	WINTER	SPRINGS	FL	32708			
	City	State		Zip			
Having been named as registered as place designated in this certificate, I further agree to comply with the proam familiar with and accept the obl	visions of all statute igations of my positi	ippointment as regain nevalating to the prop	per and con at as provid	nplete performance of ded for in Chapter 603	my duties, and I		
		(CONTINUE)	D)				
					SECRETARY OF TALLAHASSEE.	2022 MAR 3 P	FILE

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any faise information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SUJATA TORRES

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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)