

2022 May 31 Fri 12:58

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 456 MFG, 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:

Kristine Lewis
Name of Person
456 MFG, LLC
Firm/Company
12141 62nd Street N Unit 3
Address
Largo, FL 33773
City/State and Zip Code
accounting@luckysupply.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristine Lewis at (727) 953-9945
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|---|

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 FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

456 MFG, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

12141 62nd Street N Unit 4

Largo, FL 33773

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 individual or another business entity with an active Florida registration.)

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

Kristine Lewis

Name

313 Woodette Drive E

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

Dunedin

FL

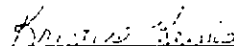
34698

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)

FILED
2021 JUN 17 PM 5:17
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

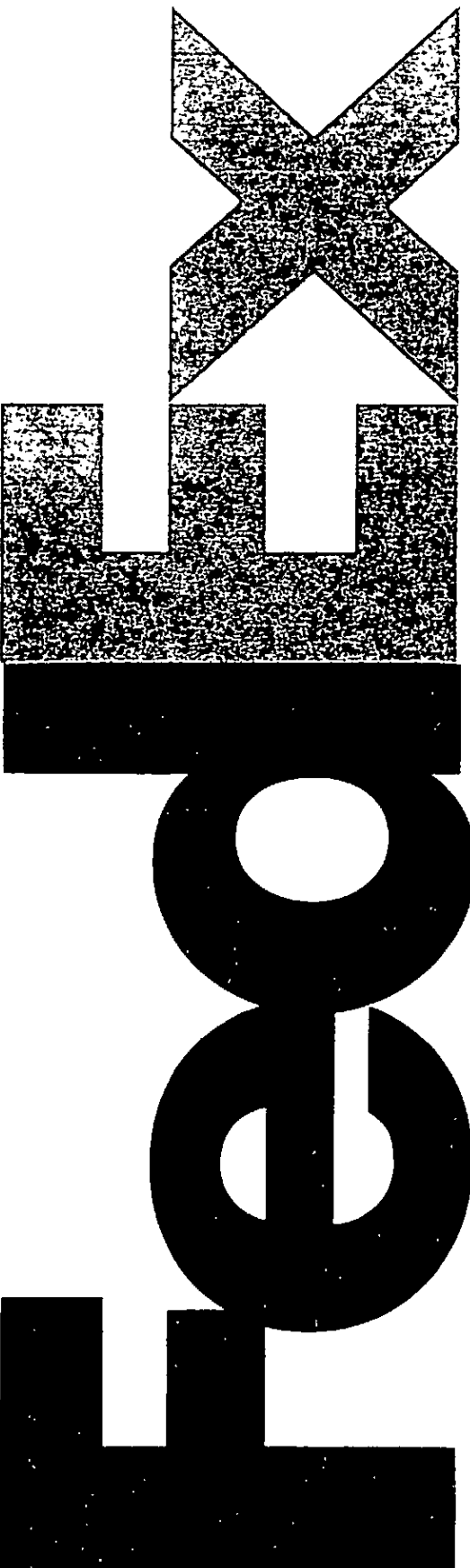
DEPARTMENT OF COMMERCIAL
REGISTRATION SERVICES

2022 MAR 31 PM 5:01

RECEIVED

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LAHASSEE HL
1610
16 MONROE ST
FILING SECTION DIVISION
LAHASSEE, HI 96751
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