L22000143043

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	· · · · · ·
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	





600384930236

04/07/22--01001--004 **160.00

S. CHATHAM APR - <u>6</u> 2022

IPR -5 PH 41 CZZ APR -6 PM 5: 53
SECRETARY OF STATE
TALLAHASSEE STATE

COVER LETTER

7

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

Princi	nal Office Address:		Mailing Address:
2121 W	Permisia st suite	= 2121	· Pensuicla St
Tallahasse	PI 32304	_ <u>Swite</u>	<u>E Talluhwiee</u> 104
·)
TICLE III - Registered A	gent, Registered Office, & Reg	istered Agent's Sign	ature:
he Limited Liability Compar	ny cannot serve as its own Regist	ered Agent. You mus	designate an individual of
ther business entity with a	active Florida registration.)		
ne name and the Florida stree	et address of the registered agent	are:	
	On had B	ules	
	Nam	<u>e</u>	
	0121 1 000	we alo 4	wite F
	WILL WHO	DUCKE JI	<u> </u>
	Florida street address (P.O	Box NOT acceptab	e)
	Florida street address (P.O.	= 1 3	<u>1304</u>

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.,

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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)