199000370819

(Re	questor's Name)	
bA)	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
L		





700391506967

S. CHATHAM AUG 25 2022

07/26/22--01032--020 **125.00

ALLAHASSEE, LION

2022 JUL 26 PH 3: 0

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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

	w Filing Sec vision of Co					
SUBJECT:	EZLYNN,	LLC				
3000001		Nai	me of Limi	ted Liabili	ty Company	
The enclose	d Articles of	Organization and	fee(s) are	submitted	for filing.	
Please retur	n all correspo	ondence concernir	ng this mat	ter to the fi	ollowing:	
	Nathan G. N	olin				
	· · · · · · · · · · · · · · · · · · ·			Name of	Person	
	Attorney at I	Law				
		······································		Firm/Co	npany	
	5407 Cotton	Strect				
				Addre	ess	
	Graceville, F	FL 32440				
n	ate@armstre	ong-jordan.com	Cit	ty/State and	l Zip Code	
<u></u>			be used f	or future a	nnual report notificati	on)
For further in	formation co	ncerning this mat	er, please	call:	·	,
i	Nathan G. N	olin	850 at (209-7153 1	
-	Nam	se of Person			Daytime Telephon	e Number
Enclosed is	a chack for t	he following amo				
		_		Cless		State of the state
□\$125.00	rung ree	□\$130.00 Filii Certificate of S		Certific	i.00 Filing Fee & ed Copy el copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailir</u>	ng Address			Street Address	
		iling Section on of Corporation	·•		New Filing Section Di The Centre of Tallaha	
		on of Corporation fox 6327	5		2415 N. Monroe Stre	
		assee, FL 32314			Tallahassee FL 3230	



August 3, 2022

CAPITAL CONNECTION, INC.

SUBJECT: EZLYNN, LLC Ref. Number: W22000100834

We have received your document for and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please ensure the document includes that manager's name.

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 022A00017375

2022 AUG 24 PH 2:46

www.sunbiz.org

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

EZLYNN, LLC		
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Сеп. Сору
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
U.g		Vehicle Search
		Driving Record
Requested by: SETH	4/22	UCC 1 or 3 File
$\frac{08/2}{\text{Name}}$	7/22 Time	UCC 11 Search
name Date	THIC	UCC 11 Retrieval
Walk-In Will F	Pick Up	Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

EZLYNN, LLC				
(Must co	ntain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	address of the principal c	office of the Limited	Liability Company is:	
<u>Princi</u>	ipal Office Address:		Mailing Address:	
1134 10th Avenue		1134	10th Avenue	
Graceville, FL 3244	40		eville, FL 32440	
(The Limited Liability Compar another business entity with ar	n active Florida registratio	Registered Agent. \on.)	it's Signature: You must designate an individual	or
(The Limited Liability Compar	ny cannot serve as its own n active Florida registratio	n Registered Agent. \ on.) d agent are:	it's Signature: You must designate an individual	or
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own n active Florida registration et address of the registered	n Registered Agent. \ on.) d agent are:	it's Signature: You must designate an individual	or
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own n active Florida registration et address of the registered	n Registered Agent. \ on.) d agent are:	it's Signature: You must designate an individual	OT
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own n active Florida registration et address of the registered Amanda Lynn Ruble	Registered Agent. \ on.) d agent are: Name	You must designate an individual	Ot
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own n active Florida registratio et address of the registered Amanda Lynn Ruble 1134 10th Avenue	Registered Agent. \ on.) d agent are: Name	You must designate an individual	or
(The Limited Liability Compar another business entity with ar	ny cannot serve as its own a active Florida registration active Florida registration at address of the registered Amanda Lynn Ruble 1134 10th Avenue Florida street address	Registered Agent. Yon.) d agent are: Name	You must designate an individual	OT

(CONTINUED)

Title:	Name and Address:	
"AMBR" = Authorize	ed Member	
"MGR" = Manager	Amanda Lynn Ruble	
AMBR	LI34 10th Avenue	
	1134 10th Avenue Grarceville, FL 32440	
		
ellective date is listed, th	other than the date of filing: (OPTIONAL) ne date must be specific and cannot be more than five business days prior to or 90 c	days :
effective date is fisted, the te of filing.) If the date inserted in th	ie date must be specific and cannot be more than five business days prior to or 90 course does not meet the applicable statutory filing requirements, this date will not be	
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REQUIRED SIGNA	is block does not meet the applicable statutory filing requirements, this date will not look the Department of State's records. Signature of a member or an authorized representative of a member. Society of the document is executed in accordance with section 605,0203 (1) (b). Florida Statutes	
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ARTICLE IV-

S 5.00 Certificate of Status (Optional)