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### COVER LETTER

	ew Filing Section ivision of Corporations
SUBJECT	All Things Under the Sun Landscaping, LLC
	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retui	n all correspondence concerning this matter to the following:
	Annelise Graham
	Name of Person
	All Things Under the Sun Landscaping, LLC
	Firm/Company
	9320 Cherry Street
	Address
	Sebastian Florida, 32976
	City/State and Zip Code Annelisegraham@sbcglobal.net
_	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
<u>,                                    </u>	Annelise Graham 708 903-5308
	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
<b>\$</b> 125.00 Fili	rng Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

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XX	РНОТОСОРУ				
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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

All Things L	Jnder the Sun Landscaping, L	_C
(Must con	tain the words "Limited Liability C	ompany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street a	address of the principal office of the	Limited Liability Company is:
<u>Princip</u>	al Office Address:	Mailing Address:
All Things Under t	he Sun Landscaping, LLC	All Things Under the Sun Landscaping, LI
9320 Cherry Stree Sebastian, Florida	a 32976	9320 Cherry Street Sebastian, Florida 32976
another business entity with an	active Florida registration.)	Agent. You must designate an individual or
another business entity with an	active Florida registration.)  address of the registered agent are:  Annelise Graham	
another business entity with an	active Florida registration.) address of the registered agent are:	
another business entity with an	active Florida registration.)  address of the registered agent are:  Annelise Graham	
another business entity with an	active Florida registration.) address of the registered agent are: Annelise Graham Name	
another business entity with an	active Florida registration.) address of the registered agent are: Annelise Graham Name 9320 Cherry Street	
another business entity with an	active Florida registration.) address of the registered agent are: Annelise Graham Name 9320 Cherry Street Florida street address (P.O. Bo	( NOT acceptable)

(CONTINUED)

Registered Agent's Signature (REQUIRED)

22 SEP -9 PH 3: 10

<u>Title:</u> "AMBR" = A "MGR" = Ma	uthorized Member nager	Name and Address:
AMDD		
AMBR	<u></u>	Annelise Graham
		9320 Cherry Street
		-Sebastian Florida 32976
	<del></del>	
	·····	
	ent if necessary)	9/9/2022 (ORTIONAL)
CLE V: Effective flective date is lee of filing.) If the date inser	e date, if other than the date of listed, the date must be speci-	filing: 9/9/2022 (OPTIONAL)  fic and cannot be more than five business days prior to or 90 days are the applicable statutory filing requirements, this date will not be lis State's records.
CLE V: Effective effective date is less of filing.) If the date inser- cument's effective	e date, if other than the date of listed, the date must be speci- ted in this block does not meet the date on the Department of	fic and cannot be more than five business days prior to or 90 days are the applicable statutory filing requirements, this date will not be lis
CLE V: Effective ffective date is lesser of filing.)  If the date inser- cument's effective  CLE VI: Other pro-	e date, if other than the date of listed, the date must be speci- ted in this block does not meet the date on the Department of	fic and cannot be more than five business days prior to or 90 days are the applicable statutory filing requirements, this date will not be lis
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CLE V: Effective ffective date is lesser of filing.)  If the date inser- cument's effective  CLE VI: Other pro-	e date, if other than the date of listed, the date must be speciated in this block does not meet the date on the Department of rovisions, if any.  SIGNATURE:  Annelise Graham /s/ Signature of a member of the document is executed I am aware that any false in	Annelise Graham ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b). Florida Statutes, formation submitted in a document to the Department of State thony as provided for in s.817.155, F.S.
CLE V: Effective effective date is less of filing.) If the date inser- cument's effective	e date, if other than the date of listed, the date must be speciated in this block does not meet the date on the Department of rovisions, if any.  SIGNATURE:  Annelise Graham /s/ Signature of a member of a memb	Annelise Graham ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b). Florida Statutes, formation submitted in a document to the Department of State thony as provided for in s.817.155, F.S.