# L22000445476

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	<del>;</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	<del></del>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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OCT !! PM !:4

# **COVER LETTER**

	New Filing Section Division of Corporations			
SUBJEC	TI: 6777.ng	Peace	LLC	
		Name of Lin	nited Liability Company	
The enclo	osed Articles of Organizatio	n and fee(s) are	e submitted for filing.	
Please re	turn all correspondence con	cerning this ma	ntter to the following:	
	c.hr.	stepher	W. Stephen	5
		<del></del>	Name of Person	
			Firm/Company	
	(918	4	Address	<u> </u>
	Fort	Nyei	s, FL 3396	7
	chris	( cor	S FL 3396  Sity/State and Zip Code  F S C re ~ n ~ + i j e S	. (0~
	E-mail addre	ss: (to be used	for future annual report notificati	on)
For further	information concerning thi	s matter, please	e call:	
	Chris Stephe	^5 at (	739 SUS-93 rea Code Daytime Telephon	130
	Name of Person	Α	rea Code Daytime Telephon	e Number
Enclosed	is a check for the following	amount:		
<b>⊠</b> \$125.0	00 Filing Fee □\$130.0 Certificat	) Filing Fee & c of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section		Street Address New Filing Section Di	ivision 20
	Division of Corpor	ations	The Centre of Fallaha	issee ' 🗧

P.O. Box 6327

Tallahassee, FL 32314

11 PM 1:44

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name	.t.E.t - Name:	:
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The name of the Limited Liability Company is:

(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:
19184 Nurcett Dr. E.	same
Fit Myers, FL 33987	

### 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:

Name

Name

1000 Taniani. Tr. N Ste 503

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

Name

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)

ARTICLE	IV	
The name a	nd	

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MG R	Christenan W. Steplens  191911 Murcott Dr. E.  Fort Myers FL 33467
	19194 Murcott Dr. E.
	Fort Myes FL 33467
AMBR	
- FANISK	Kory (condi)
	Rory Conners  147 Verment Ave  Fort Myers FL 33905
	<del></del>
(Use attachment if necessary)	
·	
	f filing: (OPTIONAL)
(If an effective date is listed, the date must be spectified the date of filing.)	ific and cannot be more than five business days prior to or 90 days after
Note: If the date inserted in this block does not me	et the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Department o	
ARTICLE VI: Other provisions, if any.	
ARTICLE VI. Other provisions, it any.	
DEALIDED CLASSITION.	A
REQUIRED SIGNATURE:	
Signature of a mer	nber or an authorized representative of a member.
	d in accordance with section 605.0203 (1) (b). Florida Statutes. information submitted in a document to the Department of State
constitutes a third degree	felony as provided for in s 817 155 F.S.
Chris	stopher W. Stephens
	Stepher W. Stephens 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)
- \$ 5.00 Certificate of Status (Optional)

2022 OCT 11 PM 1:44

Date of this notice: 10-05-2022

Employer Identification Number:

92-0590634

Form: SS-4

Number of this notice: CP 575 B

GIVING PEACE LLC CHRISTOPHER W STEPHENS MBR 19184 MURCOTT DR E FORP MYERS, FL 33967

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

# WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 92-0590634. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIM for their business. Some taxpayers receive CP575 notices when another person has stelen their identity and are opening a business using their information. If you did **not** apply for this EIM, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

Based on the information received from you or your representative, you must file the following forms by the dates shown.

Form 1065 03/15/2023

If you have questions about the forms or the due dates shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification (corporation, partnership, estate, trust, EPMF, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you and a legal determination of your tax classification, you may request a private letter uling from the IRS under the guidelines in Revenue Procedure 2020-1, 2020-1 I.R.B. 1 (c) superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election.—
See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8932, Enrity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

(IRS USE ONLY) 575B

### IMPORTANT REMINDERS:

- \* Keep a copy of this notice in your permanent records. This notice is issued only one time and the IPS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- $^{\star}$  Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this MIM on your tax-related correspondence and documents.
- Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is GIVI. You will need to provide this information along with your EIN, if you file your returns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter.

Thank you for your cooperation.

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 B

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Your	Telephone Number	Best Time to Call	DATE OF THIS NOTICE: 10	0-05-2022	<b>9</b> 22
(	} -		EMPLOYER IDENTIFICATION		
			FORM: SS-4	нов <u>о</u> р	
				•	

INTERNAL REVENUE SERVICE

GIVING PEACE LLC (T) () CHRISTOPHER W STEPHENS MEA