**Division of Corporations** Electronic Filing Cover Sheet

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Division of Corporations

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From:

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Phone : (727)279-5037 Fax Number : (727)888-1294

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Email Address: c.mcclendon303@gmail.com

#### FLORIDA LIMITED LIABILITY CO.

### Primo Botanicals, LLC

Certificate of Status	1
Certified Copy	0
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#

## **COVER LETTER**

Thursday, December 8, 2022

To: New Filing Section
Division of Corporation

# Subject: PRIMO BOTANICALS, 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:

#### FL Patel Law PLLC

360 Central Avenue 8<sup>th</sup> Floor St. Petersburg, Florida 33701 Fax: 727-888-1294

For further information concerning this matter, please call or e-mail:

Ada Reyes 727-279-5037 or e-mail at Support@flpatellaw.com

Enclosed is our fax filing coversheet for \$130.00 for Filing Fee & Certificate of Status

FL Patel Law PLLC

22 DEC -9 FM 2:

#### ARTICLES OF ORGANIZATION

#### FOR

#### PRIMO BOTANICALS, LLC

### A FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE 1. Name

The name of the Limited Liability Company is: Primo Botanicals, LLC (the "Company").

## ARTICLE II. Address

The principal office and mailing address of the Company is:

12094 Anderson Road #117 Tampa, Florida 33625

## ARTICLE III. Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida Street Address of the Registered Agent are:

FLP RA Services LLC 360 Central Avenue Suite 800 St. Petersburg, FL 33701

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.

Ada Reyes

(sign)

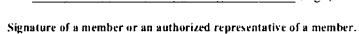
## ARTICLE IV. Authorized Members and Managers

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	Name and Address
AMBR = Authorized Member MGR = Manager	
MGR	Collin McClendon 12094 Anderson Road #117 Tampa, Florida 33625

### ARTICLE V.

The Effective date shall be the date of filing.



This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Collin McClendon	<u> </u>	1/25-	
Authorized Representative/Member	:	$\sim$	
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