# L11000000053

(Requestor's I	ame)
(Address)	
(Address)	
(City/State/Zip	(Phone #)
	_
PICK-UP W	IT MAIL
(Business Ent	ty Name)
(Document No	mber)
Certified Copies Cert	ficates of Status
Special Instructions to Filing Office	er:
Opecial matruotions to 1 ming Ome	<b>~</b> 1.
Office	lse Only



400399004164

S. CHATHAM
JAM- 3 2023

12/29/22--01002--024 \*\*155.00

ALLAHASSEE, FLORIS

DEC 29 AM II: 13

## **CORPORATE** ACCESS,

### When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

	PICK UP:	MISTY 12/29
CERTIFIED	СОРУ	
РНОТОСОРУ	<del></del>	
CUS		
FILING	LLC	
RICHIE RICH (CORPORATE NAME A	AUTO DETAIL, ND DOCUMENT #)	LLC
(CORPORATE NAME A	ND DOCUMENT #)	
(CORPORATE NAME A	ND DOCUMENT #)	
(CORPORATE NAME A	ND DOCUMENT #)	
(CORPORATE NAME A	ND DOCUMENT #)	
TOOKI OKATE NAME A	ND DOCUMENT #)	
(CORPORATE NAME A	ND DOCUMENT #)	
	CORPORATE NAME A  (CORPORATE NAME A  (CORPORATE NAME A	PHOTOCOPY  CUS  FILING  LLC  RICHIE RICH AUTO DETAIL,  (CORPORATE NAME AND DOCUMENT #)  (CORPORATE NAME AND DOCUMENT #)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	dress of the principal offic LOffice Address: Blossom Trail, Suite S16	3804	Liability Company is:  Mailing Address:  North Orange Blossom Trail, Suite S16	
3804 North Orange I Orlando, FL 32804				
Orlando, FL 32804	Blossom Trail, Suite S16		North Orange Blossom Trail, Suite S16	
ARTICLE III - Registered Ager		_	ando, FL 32804	<del></del>
The name and the Florida street ac	ddress of the registered ag			22.
	N	lame		: DEC 29
	7901 4th St N, Ste 3			29
	Florida street address (P	'.O. Box <u><b>NOT</b></u> a	eceptable)	7
	St. Petersburg	FL	33702	
	City	State	Zip	- 19
place designated in this certificale, I wither agree to comply with the pro	hereby accept the appoint visions of all statutes relat.	tment as registere ing to the proper	e above stated limited liability compared agent and agree to act in this capared and complete performance of my duals provided for in Chapter 605, F.S	ny at the acity. T

(CONTINUED)

"AMBR" = Authorized Member "MGR" = Manager  AMBR  Felix Lorcy 660 kenwick cir, Apt 103 Casselberry, FL 32707   (Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:  (OPTIONAL)  If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  Natic: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RETICLE VI: Other provisions, if any.  REQUIRED SI (NATURE:  Affects  Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, if am aware that any false information submitted in a document to the Department of State	•	"ANIRR" = And		Name and Address:		
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RETICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Afficient  Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, lam aware that any false information submitted in a document to the Department of State is manavered that any false information submitted in a document to the Department of State			l .			
(Use attachment if necessary)  (Use attachment if necessary)  (Use attachment if necessary)  (Use attachment if necessary)  (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  (OPTIONAL)  (OPTIONA	-		recr T	Folix Lorey		
(Use attachment   f necessary)  (Use attachment   f necessary)  (RTICLE V: Effective date, if other than the date of filing:  (OPTIONAL)  (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90, days after the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  (RTICLE VI: Other provisions, if any.  REOURED SI SNATURE:  Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, fam aware that any false information submitted in a document to the Department of State			<del>-  </del>		<del></del>	
(Use attachment if necessary)  RETICLE V: Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  Sote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RETICLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Affects  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, fam aware that any false information submitted in a document to the Department of State				Casselherry FI 32707		
(Use attachment if necessary)  RETICLE V: Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RETICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State				Control of the Salve		
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a decomment's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State			İ			
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a decomment's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State	_					
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  Sotte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State						
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  inte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed to document's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State			1		<u></u>	
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  Sotte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State		<u> </u>				
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State						
(Use attachment if necessary)  RETICLE V: Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RETICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State				·	_	
(Use attachment if necessary)  RETICLE V: Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90, days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RETICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State					10.5	-
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after deate of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State	-	· · · ·	<del>                                     </del>			<i>:</i> .
(Use attachment if necessary)  RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90, days after the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, am aware that any false information submitted in a document to the Department of State					_E	<u>.</u> .
RTICLE V: Effective date, if other than the date of filing:						
RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90,days after date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, am aware that any false information submitted in a document to the Department of State	,	11			_	,
RTICLE V: Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90, days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any,  REOUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, am aware that any false information submitted in a document to the Department of State	,	Use attachment	it necessary)		_:	٠٠,
f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90.days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the document's effective date on the Department of State's records.  RTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Affective  Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, am aware that any false information submitted in a document to the Department of State	134114	2.37. 1160				, ,
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, am aware that any false information submitted in a document to the Department of State	lf an effe	ctive date is list	ate, if other than the date of filinged, the date must be specific and	d cannot be more than five business days prior to or	•	s afte
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, am aware that any false information submitted in a document to the Department of State	If an effective date of Note: If the docum	ctive date is list f filing.) the date inserted tent's effective	din this block does not meet the addedonate on the Department of State	d cannot be more than five business days prior to or applicable statutory filing requirements, this date will	က i	
Signature of a member or an authorized representative of a member. 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	f an effective date of Note: If the docum	ctive date is list f filing.) the date inserted tent's effective	din this block does not meet the addedonate on the Department of State	d cannot be more than five business days prior to or applicable statutory filing requirements, this date will	က i	
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	If an effected date of Note: If the docum	etive date is list f filing.) the date inserted tent's effective E VI: Other prov	ed, the date must be specific and in this block does not meet the adate on the Department of State isions, if any,  GNATURE:	d cannot be more than five business days prior to or applicable statutory filing requirements, this date will s records.	က i	
donstitutes a third degree felony as provided for in s.817.155, F.S.	If an effective date of Note: If the docum	etive date is list f filing.) the date inserted tent's effective E VI: Other prov	ed, the date must be specific and in this block does not meet the adate on the Department of State isions, if any,  GNATURE:	d cannot be more than five business days prior to or applicable statutory filing requirements, this date will s records.	က i	<u> </u>
Amanda J. Reren	If an effective date of Note: If the docum	ctive date is list f filing.) the date inserted tent's effective EVI: Other proventials of the provential of the proventials of	cd, the date must be specific and in this block does not meet the date on the Department of State silons, if any.  GNATURE:  Signature of a member or This document is executed in according a may are that any false information.	Beven  an authorized representative of a member.  cordance with section 605.0203 (1) (b), Florida Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department submitted in a document to the Department submitted in a document to the Department submitted in a document submitted submitted in a document submitted in a document submitted	not be I	
Typed or printed name of signee	If an effective date of Note: If the docum	ctive date is list f filing.) the date inserted tent's effective EVI: Other proventials of the provential of the proventials of	cd, the date must be specific and in this block does not meet the date on the Department of State silons, if any.  GNATURE:  Signature of a member or This document is executed in account and aware that any false informationstitutes a third degree felony as	Beven  an authorized representative of a member.  cordance with section 605.0203 (1) (b), Florida Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department of Statute tion submitted in a document to the Department submitted in a document to the Department submitted in a document to the Department submitted in a document submitted submitted in a document submitted in a document submitted	not be I	
,, , , , , , , , , , , , , , , , , , , ,	If an effective date of Note: If the docum	ctive date is list f filing.) the date inserted tent's effective EVI: Other proventials of the provential of the proventials of	cd, the date must be specific and in this block does not meet the date on the Department of State sisions, if any.  GNATURE:  Signature of a member or This document is executed in account and aware that any false informationstitutes a third degree felony a Amanda J. Beren	Beven an authorized representative of a member. cordance with section 605.0203 (1) (b), Florida Statute tion submitted in a document to the Department of Status provided for in s.817.155, F.S.	not be I	
Cilles Com.	If an effective date of Note: If the docum	ctive date is list f filing.) the date inserted tent's effective EVI: Other proventials of the provential of the proventials of	cd, the date must be specific and in this block does not meet the date on the Department of State sisions, if any.  GNATURE:  Signature of a member or This document is executed in account and aware that any false informationstitutes a third degree felony a Amanda J. Beren	Beven an authorized representative of a member. cordance with section 605.0203 (1) (b), Florida Statute tion submitted in a document to the Department of Status provided for in s.817.155, F.S.	not be I	
Filing Fees:	If an effected date of Sote: If the docum.	ctive date is list f filing.) the date inserted tent's effective EVI: Other proventials of the provential of the proventials of	cd, the date must be specific and in this block does not meet the date on the Department of State isions, if any.  Signature of a member or This document is executed in account and aware that any false informationstitutes a third degree felony a Amanda J. Beren  Typed	Beven an authorized representative of a member. cordance with section 605.0203 (1) (b), Florida Statute tion submitted in a document to the Department of Status provided for in s.817.155, F.S.	not be I	
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	f an effected date of Sote: If the docum	ctive date is list f filing.) the date inserted tent's effective E VI: Other proventies of the provent	cd, the date must be specific and in this block does not meet the state on the Department of State is isions, if any.  GNATURE:  Signature of a member or This document is executed in account and any false informationstitutes a third degree felony a Amanda J. Beren  Typed  Fee for Articles of Organization	Beven an authorized representative of a member. cordance with section 605.0203 (1) (b), Florida Statute tion submitted in a document to the Department of Status provided for in s.817.155, F.S.  or printed name of signee	not be I	<u> </u>