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December 1	
(Requestor's Name)	
(Address)	
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(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
ec Copies Certificates of Status	
equal Instructions to Filing Officer:	
Office Use Only	



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S. CHATHAM 2023

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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 305611 7422869 AUTHORIZATION : COST LIMIT : \$ 13 ORDER DATE: January 4, 2023 ORDER TIME : 2:11 PM ORDER NO. : 305611-005 CUSTOMER NO: 7422869 DOMESTIC FILING NAME: DANIELSON11600 LLC EFFECTIVE DATE: _ ARTICLES OF INCORPORATION ____ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

CORPORATION SERVICE COMPANY

EXAMINER'S INITIALS:

COVER LETTER

TO:	New Filing Section Division of Corporations
SUBJE	CT: Danielson11600 LLC
	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Athena Ware
	Name of Person
	First American Exchange Company, LLC
	Firm/Company
	333 W SANTA CLARA ST, SUITE 622
	Address
	SAN JOSE, CA 95113
	City/State and Zip Code Ldg2834@gmail.com
	E-mail address: (to be used for future annual report notification)
or furth	er information concerning this matter, please call:
	Lauren Danielson at (941) 448-7546
	Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
□\$125	.00 Filing Fee Status
	Mailing AddressStreet AddressNew Filing SectionNew Filing Section DivisionDivision of CorporationsThe Centre of TallahasseeP.O. Box 63272415 N. Monroe Street. Suite 810Tallahassee FL 32314Tallahassee FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

·	Danielson 11600 LLC		
	(Must contain the words "Limited Liabi	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing add	Address: fress and street address of the principal office	f the Limited Liability Company is:	:
	Principal Office Address:	Mailing Address:	
14	61 NW 114th Loop, Ocala, FL 34475	1461 NW 114th Loop, Ocala, FL 34475	
The Limited Li	Registered Agent, Registered Office, & Roability Company cannot serve as its own Regi		individual or r
The Limited Li nother busines	ability Company cannot serve as its own Regiss entity with an active Florida registration.) ne Florida street address of the registered agen	ered Agent. You must designate an	n individual or (
The Limited Li mother busines	ability Company cannot serve as its own Registration.)	ered Agent. You must designate an	n individual or
The Limited Li mother busines	ability Company cannot serve as its own Regists entity with an active Florida registration.) The Florida street address of the registered agent Lauren Danielson	ered Agent. You must designate an	ن _{ال} الله الله الله الله الله الله الله ال
The Limited Li mother busines	ability Company cannot serve as its own Regists entity with an active Florida registration.) The Florida street address of the registered agent Lauren Danielson National Science (National Science (National Science))	ered Agent. You must designate an are:	n individual or
The Limited Li mother busines	ability Company cannot serve as its own Regists entity with an active Florida registration.) The Florida street address of the registered agent Lauren Danielson National Science Na	ered Agent. You must designate an are:	

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Author "NGB" = M		
"MGR" = Manag <u>MG</u> R	Lauren Danielson	
	1461 NW 114th Loop, Ocala, FL 34475	
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(Use attachment i	Inecessary)	``
If an effective date is liste he date of filing.) Note: If the date inserted	te, if other than the date of filing:	
ARTICLE VI: Other provi	ions, if any.	
		_
REOUIRED SIG	NATURE:	
	Athena Ware	
I	Signature of a member or an authorized representative of a member, his 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 onstitutes a third degree felony as provided for in s.817.155, F.S.	
	Athena Ware	
	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)