

L23000018721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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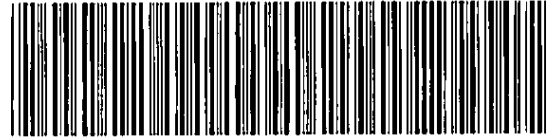
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Rubs & Scrapes, 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:

Grover Cleveland Godwin  
Name of Person

Firm/Company

55 Wildflower Lane  
Address

Crawfordville FL 32327  
City/State and Zip Code

Cletus 9396 @ gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cleve Godwin at ( 850 ) 5569396  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate 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  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

SECRETARY OF STATE  
TALLAHASSEE, FL 32303

23 JAN 18 PM 7:59

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**ARTICLES OF ORGANIZATION  
OF  
RUBS & SCRAPES, LLC**

The undersigned, pursuant to the provisions of Chapter 605, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.**

The name of the Limited Liability Company is Rubs & Scrapes, LLC

The street and mailing address of the place of business in Florida is:

55 Wildflower Lane  
Crawfordville, FL 32327

**ARTICLE 2.**

**Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

**Grover Cleveland Godwin**  
55 Wildflower Lane  
Crawfordville, FL 32327

*Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.*

  
\_\_\_\_\_  
Grover Cleveland Godwin, Registered Agent

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2018  
JAN 18 PM 7:58  
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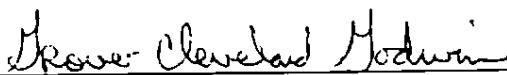
**ARTICLE 3.  
Management**

The Limited Liability Company shall be managed by at least one Manager and is, therefore, a Manager-managed company. The name and address of the person authorized to manage and control the Limited Liability Company as Manager are as follows:

**Grover Cleveland Godwin**  
55 Wildflower Lane  
Crawfordville, FL 32327

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this  
18 day of January, 2023.

*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 Section 817.155, F.S.*

  
\_\_\_\_\_  
Grover Cleveland Godwin

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TALLAHASSEE, FLORIDA