12300004544

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

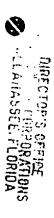
Office Use Only



200400517062

11 7: 59

01/31/23--01002--016 >



COVER LETTER

	New Filing Sec Division of Cor			
SUBJEC	T: <u>T</u> he	Shipping Name of time	Girl LLC ited Liability Company	
The enclo	osed Articles of	Organization and fee(s) are	submitted for filing.	
Please re	turn all correspo	ndence concerning this mai	tter to the following:	
		Scott	Name of Person	
		Rivervieu	Firm/Company	
	957	O Aegency	Square BLV	0
	Sc	od+ban640	ty/State and Zip Code Legman Leom for future annual report notificati	
For further	information co	ncerning this matter, please	calf:	
	Scott Nam	e of Person Ar	ea Code Daytime Telephon	
Enclosed	is a check for th	ne following amount:		
□\$125.0	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
	New F Divisio P.O. B	g Address ling Section on of Corporations ox 6327 assee, FL 32314	Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810



January 31, 2023

SCOTT HALL 9570 REGENCY SQUARE BLVD JACKSONVILLE, FL 32225

SUBJECT: THE SHIPPING GIRL LLC

Ref. Number: W23000012747

We have received your document for THE SHIPPING GIRL LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

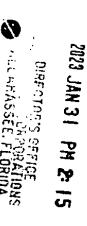
Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

The person signing the Articles of Organization to form the Florida limited liability company is an "authorized representative," not an "incorporator." Please substitute the words "authorized representative" for the word "incorporator" in your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II



Letter Number: 223A00002317

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Shipping Girl LLC
(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:

204 SW 16th Court

Voit D. FT. Lawkerdale, FL

33345

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:

Scott Hell
Name

9570 Regency Square BLM

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

Jacksonville Fl 32225
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 positional as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MG PA	Steve Ceveaux 2045 WITH Court-Vait D FT. Landwale, FL, 1713	- - -
AMGR	Steven Deveaux 2045 Witch Count-Unito FT. Londendote, FL, 33315	-
AMGR	Jordan Deveaux 2045 W 1674 Court - Unit D FT. Landerdale, FL, 32315	-
AMGQ	Joelle Deveaux 2045W1616Count-WATD FT. Landerdale, Fly 33315	- - -
(Use attachment if necessary)		
the date of filing.)	ific and cannot be more than five business days prior to or 90 et the applicable statutory filing requirements, this date will not	
ARTICLE VI: Other provisions, if any.		
This document is executed I am aware that any false is constitutes a third degree f	ber of an authorized representative of a member. I in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State elony as provided for in s.817.155, F.S. Typed or printed name of signee	
\$125.00 Filing Fee for Articles of Orga \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional	Filing Fees: nization and Designation of Registered Agent)	20 23 Ji13. Pi
		P::