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SECRETARY OF STATE

2023 JAN 23 PM 6: 47

BA 2-22-37

COVER LETTER

	Kew Filing Sec Division of Cor				
enn isc	E&B Produ F:				
NUBJEC	·	Name of Lin	nited Liabilit	y Company	
The enclo	sed Articles of	Organization and fee(s) are	submitted f	or filing.	
Please ret	um all correspo	ondence concerning this ma	tter to the fo	llowing:	
	Sarah Englar	nd-Весетта, Mario Весетта			
			Name of I	erson	

			Firm/Con	npany	
	4184 Marseil	lle Lane			
			Addre	ss	
	Lakeland, Fl	orida 33810			
	•		ity/State and	Zip Code	
	ebproductslic(<u></u>	
	Ŀ	E-mail address: (to be used	for future ar	mual report notificati	ion)
For further	information co	ncerning this matter, please	call:		
	Sarah Englan	d-Becerra 81	-	679-8518	
	Nam	e of Person A	rea Code	Daytime Telephon	e Number
Enclosed	is a check for th	ne following amount:			
□\$125.0	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certifie	.00 Filing Fee & d Copy I 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

2023 JAN 23 PM 6: 4

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:			
E & B Products, L.L.C		h i destriction	NI LONG MILON	
(Musi coma	in the words. Limited	i Liability Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address	lress of the principal	office of the Li	mited Liability Company is:	
<u>Principa</u>	Office Address:		Mailing Add	lress:
4184 Marseille Lane,	akeland FI 33810		4184 Marseille Ln, Lakeland	d, FI 33810
ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac	annot serve as its ow	n Registered A		ndividual or
The name and the Florida street address of the registered agent are:				
	Sarah England-Beco	erra		
		Name		
4184 Marseille Ln				
	Florida street address (P.O. Box NOT acceptable)			
	Lakeland	<u> </u>	33810	
	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 position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 JAN 23 PM 6: 48 SECRETARY OF STATE The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Men	nber
"MGR" = Manager	
AMBR	Mario Becerra
	4184 Marseille Lane.
	Lakeland , Ft. 33810
AMBR	Sarah England-Becerra 4184 Marseille Ln
	Lakeland, Fl 33810
	Lakeland, (1.5,7010
•	
(Use attachment if necessary ARTICLE V: Effective date, if other (If an effective date is listed, the date	than the date of filing: 01/17/2023 (OPTIONAL) e must be specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	ck does not meet the applicable statutory filing requirements, this date will not be listed as
the document 3 cricetive date on the	Department of British Streets.
ARTICLE VI: Other provisions, if an	у.
REQUIRED SIGNATUR	E: A
✓ }	ear 7 D - Voerra
Signa	ture of a member or an authorized representative of a member.
This docum	nent is executed in tecordance with section 605.0203 (1) (b), Florida Statutes.
	that any false information submitted in a document to the Department of State
constitutes a	a third degree felony as provided for in s.817.155, F.S.
Scral	h England-Becerra
Situ	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)

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SECRETARY OF STATE
TALLAHASSEE, FL