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SECRETARY OF STATE

COVER LETTER

TO:	New Filing S Division of C				
SHRIF	SELLER	S PURCHASING & LOC	SISTICS LLO		
SOBJE			Limited Liab	ility Company	
The encl	osed Articles o	of Organization and fee(s)	are submitte	d for filing.	
Please re	eturn all corres _l	pondence concerning this	matter to the	following:	
	Elizabeth S	ellers			
			Name o	f Person	
	SELLERS	PURCHASING & LOGIS	STICS LLC		
			Firm/C	ompany	
	9175 Count	y Road 647D			
			Add	ress	
	Bushnell, F	L 33513			
			City/State ar	nd Zip Code	
	escilers2011(_	
		E-mail address: (to be use	d for future:	innual report notifical	tion)
For further	information ec	oncerning this matter, plea	se call:		
	Elizabeth Sellers		352	461-7149 .)	
	Name of Person			Daytime Telephor	ne Number
Enclosed	is a check for t	he following amount:			
	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐S160.00 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 FI

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
SELLERS PURCHASING & LOGISTICS LLC	
(Must contain the words "Limited Liabi	lity 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:	Mailing Address:
9175 County Road 647D	9175 County Road 647D
Bushnell, FL 33513	Bushnell, FL 33513
<u> </u>	
ARTICLE III - Registered Agent, Registered Office, & Re	gistered Agent's Signature:
(The Limited Liability Company cannot serve as its own Regi	stered Agent. You must designate an individual or
another business entity with an active Florida registration.)	<u>-</u>
The name and the Florida street address of the registered agen	t are:

Elizabeth Sellers

Bushnell

9175 County Road 647D

City

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..

Name

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

Registered Agent's Signature (REQUIRED)

33513

Zip

(CONTINUED)

2023 FEB | 4 AM 7: 56 SECRETARY OF STATE

ARTICLE IV-

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

	.1 * 182 6	Name and Address:	
"MGR" = Man	thorized Member		
MGR	<u> </u>	Elizabeth Sellers	
171010		9175 County Road 647D	
		Bushnell, FL 33513	
	<u> </u>		
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