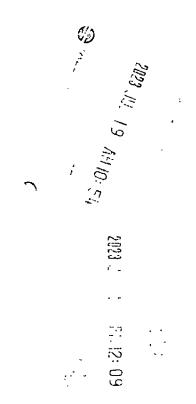
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PICK-UF	WAIT MAIL
	(Business Entity Name)
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	(Document Number)
Certified Copies	Certificates of Status
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Special Instructions to	Filing Officer:
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Office Use Only



100412336681



Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State The Centre of Tallahassee

2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE: 7/19/2023 OUR REF # (Order ID#): 1166288 **PRIORITY** Regular Approval

ORDER ENTITY

ORGANIZING BY CORA LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

ORGANIZING BY CORA LLC (FL)

New LLC filing

NOTES: \$125.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Wednesday, July 19, 2023 Page 1 of 1

COVER LETTER

TO:	New Filing Sec Division of Cor				
SUBJEC		ING BY CORA LLC			
SOBAGE		Name of Lim	ited Liabil	ity Company	
The encl	osed Articles of	Organization and fee(s) are	submitted	for filing.	
Please re	turn all correspo	ondence concerning this ma	tter to the t	following:	
	Sapphire Ma	rquez			
			Name of	Person	
	SunDoc Fili	ngs			
	<u>.</u>	·	Firm/Co	mpany	
	7801 Folson	i Blvd Ste 202			
			Addr	ess	
	Sacramento	CA 95826			
			ty/State an	d Zip Code	
	aclouden@lm	·	P P	1	
		E-mail address; (to be used		nnuai report notificati	an)
For further	r information co	ncerning this matter, please	call:		
	Amanda Clou	iden 78	1	878-9111 1	
	Nam			Daytime Telephon	
Encloser	Lie a check for t	ne following amount:			
	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certific	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address iling Section		Street Address New Filing Section Di	vision
	P.O. B	on of Corporations ox 6327 assee, FL 32314		The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230.	issee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ORGANIZING BY CORA LLC (Must contain the word	ds "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Ac	ddress: Mailing Address:
11326 HIDALGO CT	11326 HIDALGO CT
FORT MYERS FL 33912	FORT MYERS FL 33912

Com C. Davie

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.

/S/ Cora S. Revis

Registered Agent's Signature (REQUIRED)

(CONTINUED)

PI 12: 09

ARTICLE IV-

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

	Name and Address: Tember
"MGR" = Manager	
MGR	Cora S. Revis
HIGH	Cora S. Revis 11326 Hidalgo Court Fort Myers FL 33912
	Fort Myers FL 33912
	
	
Use attachment if necess	ary)
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