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Florida Department of State

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	Division of Corporations		
	Fax Number : (858)617-6381 RESUBM	SSION .	
From	Carrie Ramos, FRP, Paralegal PLEASE FAX	CONFIRMATION TO 40) 7- 244
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	Account Number : I20010000078	:老笠	ے ف
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FLORIDA LIMITED LIABILITY CO.

Horizon Light &xLLC

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October 9, 2023

FLORIDA DEPARTMENT OF STATE Division of Corporations

CARRIE RAMOS, PARALEGAL

SUBJECT: HORIZON LIGHT CO LLC

REF: W23000137944

RESUBMITTED DOCUMENT ATTACHED

We received your online transmitted document. However, the document has not been filed for the following:

The name of the entity cannot include ""Co" and "Company" are clearly defined in Florida Statutes 607.0401 as a corporate indicator. In Florida Statutes 605.0112 (d) a limited liabilit." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

"Co" and "Company" are clearly defined in Florida Statutes 607.0401 as a corporate indicator. In Florida Statutes 605.0112 (d) a limited liability company's name may not contain language stating or implying that the limited liability company is connected with a state or federal government agency or a corporation or other entity chartered under the laws of the United States. As this is listed in the Statutes, a limited liability company cannot have the words "Co" or "Company" unless the name of the limited liability company uses the phrase "&/And Co" or "&/And Company" as it indicates there are more "associates/partners". "Companies" is also allowed in a limited liability company name as it is not defined in Statute 607.

0401 as a corporate indicator.

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

Crystal S Hightower Regulatory Specialist II CoT

FAX Aud. #: H23000351509 Letter Number: 723A00023323

407.244.5690

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<u>ARTICLES OF ORGANIZATION</u> FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name

The name of this Limited Liability Company is:

Horizon Light LLC

ARTICLE II Address

The mailing address of this Limited Liability Company is:

10489 Arrowhead Drive Jacksonville, FL 32257

The principal office address of this Limited Liability Company is:

279 Corydon Drive Miami Springs, FL 33166

ARTICLE III Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

ARTICLE IV Initial Board of Managers

This Limited Liability Company shall have two (2) managers initially. The number of managers may be either increased or decreased from time to time in accordance with the Operating Agreement of this Limited Liability Company, but shall never be less than one.

The names and addresses of the initial managers of this Limited Liability Company are as follows:

<u>Name</u>	<u>Address</u>
Ayao-Yao Sossou	10489 Arrowhead Drive Jacksonville, FL 32257
Akiba Sossou	10489 Arrowhead Drive Jacksonville, FL 32257

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ARTICLE V Registered Agent, Registered Office & Registered Agent's Signature

407.244.5690

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

> Kenneth B. Jacobs c/o GrayRobinson, P.A. 50 N. Laura Street, Suite 1100 Jacksonville, FL 32202

Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, I hereby accept this appointment and agree to serve this Limited Liability Company in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performs 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.





(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 s. 817.155, F.S.)

AYAO-YAO SOSSOU, AUTHORIZED REPRESENTATIVE Type or printed name of signee

FILING FEES: \$100.00 Filing Fee for Articles of Organization \$25,00 Designation of Registered Agent \$30,00 Certified Copy (OPTIONAL) \$5.00 Certificate of Status (OPTIONAL)

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