

L23000 473 137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

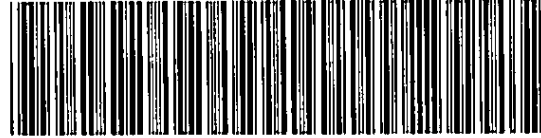
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

T. SCOTT

OCT 17 2023



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CLERK OF COURT

2023 OCT 17 PM 2:40

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Abundant Culture Management Group, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jasmine Mims
Name of Person

Abundant Culture Management Group, LLC
Firm/Company

17945 SW 9th Ave Apt 446
Address

Palmetto Bay, FL 33157
City/State and Zip Code

info@abundantculture.co
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jasmine Mims at (708) 297-1565
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Abundant Culture Management Group, 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:

17945 SW 97th Ave Apt 446
Palmetto Bay, FL 33157

Mailing Address:

17945 SW 97th Ave Apt 446
Palmetto Bay, FL 33157

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:

Jasmine Mims
Name

17945 SW 97th Ave Apt 446
Florida street address (P.O. Box NOT acceptable)
Palmetto Bay FL 33157
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.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Jasmine Mims

17945 SW 8TH AVE Apt 446
Palmetto Bay, FL 33157

AMBR

Joseph Mims

17945 SW 8TH AVE Apt 446
Palmetto Bay, FL 33157

(Use attachment if necessary)

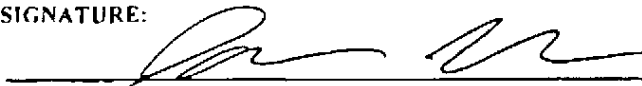
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Jasmine Mims

Typed or printed name of signee

Filing Fees:

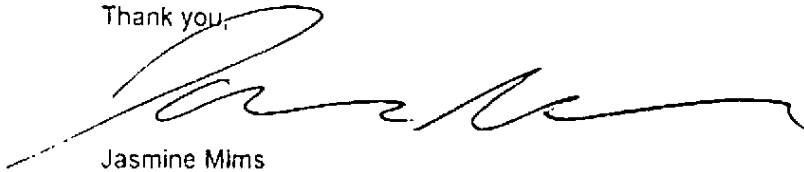
- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

10/6/2023

To the state of Florida.

Please see attached my new FL LLC articles of incorporation for ABUNDANT CULTURE MANAGEMENT GROUP, LLC. I paid the fee in 2022, and would like that fee to be applied now in 2023.

Thank you,

A handwritten signature in black ink, appearing to read 'Jasmine Mims', with a long horizontal flourish extending to the right.

Jasmine Mims
708-297-1565

17945 SW 9TH AVE Apt 446
Palmetto Bay, FL 33157

info@abundantculture.co