L23000554289

(Requestor's Name)					
(Address)					
,					
(Address)					
(Addless)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(200,000 200,000)					
(Document Number)					
Certified Copies Certificates of Status					
0 111 1 1 1 1 1					
Special Instructions to Filing Officer:					

Office Use Only



200420230182

12/13/23--01016--003 **130.00

20 13 PH 12:1

T.5.4 12/19/23

COVER LETTER

TO:	New Filing Sec Division of Cor		€ ∉	
SUBJE	ст: <u>Relic</u>	Name of Limit	NOW ited Liability Company	
The end	closed Articles of	Organization and fee(s) are	submitted for filing.	
Please	return all correspo	ondence concerning this mat	ter to the following:	
	Niko	la E. Niko	Name of Person	
	<u>Relia</u>	able Notary	NOW Firm/Company	.
	1955	Francis Ave	Address	
	_Atlan _nniko/	cheva@hot	ty/State and Zip Code Mail · COM for future annual report notificati	ion)
For furth	er information co	ncerning this matter, please	call:	
	Nikola Nam	e of Person Are	16 517 - 770 ca Code Daytime Telephon	e Number
Enclose	ed is a check for th	ne following amount:		
□\$125	5.00 Filing Fee	S\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailin</u>	g Address	Street Address	7073

New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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:	

iable Materia Maria I.I.

(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:

Francis Ave

Mailing Address:

Atlantic 1

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:

Nikola Nikolcher

Name

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

Allandia Tanda Ti 2007

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)

ARTICLE VI: Other provisions, if any.

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.

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)

REQUIRED SIGNATURE:

.. 50