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COVER LETTER

Division of Corporations
SUBJECT: Love & Unity 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:
Janyah Bra(y Name of Person
Love & Unity LLC Firm/Company)
2700 W Pensacola Street
Tallanasser FL 32304 City/State and Zip Code
janiyahbray@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Janiyan Bracy an (904) 577-6761
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, 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

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

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..

Januah Brown
Registered Agent's Signaphre (REQUIRED)

Janyah Bracy
Name

2700 W Persacola Street
Florida street address (P.O. Box NOT acceptable)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MER	Joniyah Bracy 2700 W ponsacola St Apt. 2414
AMBR:	Tearrius Jackson 850 Capital Walk Dr. Apt. 8305
(Use attachment if necessary)	te of filing: (OPTIONAL)
an effective date is listed, the date must be set date of filing.)	pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed a
REQUIRED SIGNATURE:	Jah Buorcy
This document is exec I am aware that any fal	nember or an authorized representative of a member, uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.
<u>Jar</u>	Typed or printed name of signee
\$125.00 Filing Fee for Articles of O	Filing Fees:

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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