Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : COMITER & SINGER, LLP

Account Number : 128000000085 : (561)626-4742 Phone (561)625-4742 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please, **

Enail Address: corporate@comitersinger.com

FLORIDA LIMITED LIABILITY CO.

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Always Ready, LLC Always Ready Notrition, LLC

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T. MATTHEWS

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3/18/2024 7:12:30 AM PAGE 1/001 Fax Server



March 17, 2024

PLORIDA DEPARTMENT OF STATE
Division of Corporations

COMITER & SINGER, LLP

SUBJECT: ALWAYS READY, LLC

REF: W24000042771

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

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Carlos E Rico Supervisor New Filing Section FAX Aud. #: H24000101119 Letter Number: 724A00005740

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COVER LETTER

TO:	New Filing Section Division of Corporation	15			
ennire	Always Ready Nutr	ition, LLC			
SUBJEC	.li <u></u>	Name of Limit	ed Liability	Company	
The encl	osed Articles of Organiz	ation and fee(s) are	submitted fo	r filing.	
Please re	num all correspondence	concerning this matt	er to the fol	lowing:	
	Andrew R. Comiter,	Esq.			
			Name of P	rson	
	Comiter, Singer, Bas	eman & Braun, LLI	?		
			Firm/Com	pany	
	3825 PGA Blvd., Su	ite 701			
			Addres	3	
	Palm Beach Gardeni	i, FL 33410			
			ty/State and	Zip Code	
	corporate@comiterain		for future an	nual report notification	on)
For furth	er information concerning			·	
	Rebecca Byers	56	1	626-2101	
	Name of Per	son Ar		Daytime Telephone	Number
Factors	ed is a check for the folio	wing amount:			
	5.00 Filing Fee	30.00 Filing Fee & ficate of Status	Certifie	.00 Filing Fee & d Copy (copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Add			Street Address New Filing Section Di	ivision
	New Filing Se Division of C	orporations	1	The Centre of Tallaha	15500
	P.O. Box 632			2415 N. Monroe Stree Fallahassee, Fl. 3230	

Ha405010FD3

2024 MAR 22 PM 1: 20

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLESOF	OKGANIŽATION FOR FLO	RIDALIMITE	DLIABILITYCUMPANY	- TOT LOV OF STATE
				SECRETARY OF STATE
ARTICLE I - Name: The name of the Limited Liability	Company is:			TALL WANDOER !
I he hame of the Limited Fracting	Company iv.			
Always Ready Nutriti	on, LLC in the words "Limited Liab	ilia Compani	· HI I C "OF HI C")	
(Must conte	in the words "Limited Liad	inty Company	, 6.5.0., 01 550.)	
ARTICLE II - Address: The mailing address and street ad	dress of the principal office	c of the Limite	ed Liability Company is:	
Principa	Office Address:		Malling Addre	<u>ss</u> :
2000 Glades Road, St	rite 212		00 Glades Road, Suite 212	
Boca Raton, FL 3343		<u>B</u>	ca Raton, FL 33431	
		_ _		
ARTICLE III - Registered Age.	nt Registered Office, & I	Registered Ag	ent's Signature:	
(The Limited Liability Company)	cannot serve as its own Re	Sizicico wilcu	t. You must designate an ind	ividual or
another business entity with un a	ctive Florida registration.)			
The name and the Florida street a	uldress of the registered ag	ent arc:		
The name and me I fortun sheet o				
	Comiter, Singer, Basem		LP	
	N	ame		
	3825 PGA Blvd., Suite	701	<u> </u>	
	Florida street address (F	P.O. Box <u>NO</u>	acceptable)	
	Palm Beach Gardens	FL.	33410	
	City	State	Zip	
	•			line company at the
Having been named as registered a place designated in this certificate,	gent and to accept service (of process for i	ine above sidiku ilmileu liduli ered ogent and agree to act l	n this capacity. I
	i-i of all elabiles reial	anu in ina aroi	MET CINCI COMPUTER DEFINITIONS	C () 11) WHITE C
further agree to comply with the pro am familiar with and accept the ob-	ligations of my position as t	egistered age	nt as provided for in Chapter	605, F.S
	10//	///_		
	Alfr			
	Registere	d Agent's Sign	nature (REQUIRED)	
	-	_		
	,	CONTINUE	n)	
	(COLLEGE	-,	

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"AMBR" = Authorized Member "MGR" = Manager MGR, P 2000 Glades Road, Suite 212 Boca Raton, FL 33431 MGR Darielle Singerman 2000 Glades Road, Suite 212 Boca Raton, FL 33431 MGR Kevin Mastaler 2000 Glades Road, Suite 212 Boca Raton, FL 33431 (Use attachment if necessary) ICLE V: Effective date, if other than the date of filing: In 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.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	Title:	Name and Address:
MGR. P Aeron Singerman 2000 Glades Road, Suite 212 Boca Raton, FL 33431 MGR Darielle Singerman 2000 Glades Road, Suite 212 Boca Raton, FL 33431 MGR Kevin Mastaler 2000 Glades Road, Suite 212 Boca Raton, FL 33431 (Use attachment if necessary) ICLE V: Effective date, if other than the date of filing: I effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after ate of filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed incument's effective date on the Department of State's records. ICLE 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 fails information submitted in a document to the Department of State constitutes a third degree fellow as provided for in a.817.155, F.S.	"AMBR" = Authorized Mem	ber
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agant
\$ 30.00 Certified Copy (Optional)
\$ 5.06 Certificate of Status (Optional)