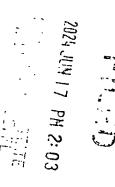
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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





06/17/24--01007--008 \*\*160.00



# COVER LETTER

TO:	New Filing Section Division of Corporations	
our II	URBAN EYEZ	
SUBJE		ed Liability Company
The en	nclosed Articles of Organization and fee(s) are s	ubmitted for filing.
Please	return all correspondence concerning this matter	er to the following:
	CHI'MYA R. E. LEWIS	
		Name of Person
		Firm/Company
	943 WAVERLY BLUFF COURT	
		Address
	ORANGE PARK FLORIDA 32065	
	City	//State and Zip Code
	MYALEWIS0420@ICLOUD.COM	
	E-mail address: (to be used to	r future annual report notification)
For furth	her information concerning this matter, please c	all:
	CHI'MYA R. E. LEWIS 904	
		a Code Daytime Telephone Number
Enclos	sed is a check for the following amount:	
	25.00 Filing Fee   \$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)
	Mailing Address	Street Address New Filing Section Division
	New Filing Section Division of Corporations	The Centre of Tallahassee
	P.O. Box 6327	2415 N. Monroe Street, Suite 810 Tallahassec, FL 32303
	Tallahassee, FL 32314	Tallahassee, FL 32303

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability	Company is:			
URBAN EYEZ LLC				
(Must conta	in the words "Limited Li	iability Company, "	L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street ad	dress of the principal off	ice of the Limited I	Liability Company is:	
n · ·	108 411		Mailina Adda	
Principa	l Office Address:		Mailing Addr	<u> 1888</u> :
943 WAVERLY BLU	JFF COURT	943 V	VAVERLY BLUFF CO	URT
ORANGE PARK FL	ORIDA		NGE PARK FLORIDA	
32065		<u>32065</u>	5	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own R	Registered Agent. Y	l's Signature: ou must designate an inc	dividual or
The name and the Florida street a	ddress of the registered a	agent are:		
	CHI'MYA R. E. LEW	IS		
		Name		
	943 WAVERLY BLU	FF COURT		
	Florida street address	(P.O. Box <u>NOT</u> ac	ceptable)	
	ORANGE PARK	FLORIDA	32065	
	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)

2024 JUH 17 PM 2: 03

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44	м.			. F.	1 V -

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	ERIKA R. JACKSON 943 WAVERLY BLUFF COURT
	ORANGE PARK FLORIDA 32065
<del></del>	
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must the date of filing.)	te date of filing:
Note: If the date inserted in this block does the document's effective date on the Depart	s not meet the applicable statutory filing requirements, this date will not be listed a tment of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	2. Jack sur
This document is I am aware that an	f a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes, y false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.
FRIKA R	JACKSON
<u> Dimini II.</u>	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)

# **COVER LETTER**

TO:	New Filing Sec Division of Co				
SUBJE	URBAN E				
		Name of Li	mited Liabili	ty Company	
The end	losed Articles of	Organization and fee(s) as	re submitted	for filing.	
Please r	eturn all corresp	ondence concerning this m	atter to the fe	ollowing:	
	CHI'MYA I	R. E. LEWIS			
			Name of	Person	
			Firm/Co	npany	
	943 WAVE	RLY BLUFF COURT			
			Addro	ess	
	ORANGE I	PARK FLORIDA 32065			
	MYALEWIS	(60420@ICLOUD.COM	City/State and	l Zip Code	
		E-mail address: (to be used	for future a	nnual report notificat	ion)
For furth	er information co	oncerning this matter, pleas	e call:		
	CHI'MYA R		04	729-1455	
	Nan		Area Code	Daytime Telephon	e Number
Enclose	ed is a check for	the following amount:			
□\$125	5.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certific	5.00 Filing Fee & ed Copy al copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Maili	na Address		Street Address	

**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 Tailahassee, FL 32303

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability	Company is:		
URBAN EYEZ LLC			
(Must conta	in the words "Limited Li	ability Company, "L.	L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street ad	dress of the principal off	ice of the Limited Lia	bility Company is:
3	, ,		
<u>Principa</u>	l Office Address:		Mailing Address:
943 WAVERLY BLU	JFF COURT	943 W.A	VERLY BLUFF COURT
ORANGE PARK FLO			GE PARK FLORIDA
32065		32065	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ac	cannot serve as its own R	legistered Agent. You	Signature: nust designate an individual or
The name and the Florida street a	ddress of the registered a	igent are:	
	CHI'MYA R. E. LEW	ıs	
		Name	
	943 WAVERLY BLU	FF COURT	
	Florida street address (	(P.O. Box <u>NOT</u> acce	ptable)
	ORANGE PARK	FLORIDA	32065
	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 IV-

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

"AMBR" = Authorized Member "MGR" = Manager	
"MUR = Manager	
1.1011	
MGR	ERIKA R. JACKSON
	943 WAVERLY BLUFF COURT ORANGE PARK FLORIDA 32065
	ORANGE PARK FLORIDA 32003
(Use attachment if necessary)	
	est most the conficeble statutory filing requirements, this date wall not be b
ument's effective date on the Departm	not meet the applicable statutory filing requirements, this date will not be linent of State's records.
ument's effective date on the Departm  LE VI: Other provisions, if any.	
ument's effective date on the Departm LE VI: Other provisions, if any.	ment of State's records.
LE VI: Other provisions, if any.  REQUIRED SIGNATURE:	ent of State's records.
LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a	a member of a nember.
REQUIRED SIGNATURE:  Signature of a This document is ex	a member of a nember.  secuted in accordance with section 605.0203 (1) (b), Florida Statutes.
REQUIRED SIGNATURE:  Signature of a This document is explanation.	a member of a nember.
REQUIRED SIGNATURE:  Signature of a This document is explanation of a management of a constitutes a third decorated at the constitutes a third decorated at the constitutes a third decorated at the constitutes at the consti	a member or an authorized representative of a member. Secuted in accordance with section 605.0203 (1) (b), Florida Statutes. False information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
REQUIRED SIGNATURE:  Signature of a This document is explanation.	a member or an authorized representative of a member. Secuted in accordance with section 605.0203 (1) (b), Florida Statutes. False information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
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REQUIRED SIGNATURE:  Signature of a This document is ex I am aware that any constitutes a third de	a member of a nauthorized representative of a member.  a member of an authorized representative of a member.  a member of a member.  a mem