Electronic Articles of Organization For Florida Limited Liability Company

L24000350627 FILED 8:00 AM August 13, 2024 Sec. Of State klovelace

Article I

The name of the Limited Liability Company is: PHILIP ANTHONY MARTIN LLC

Article II

The street address of the principal office of the Limited Liability Company is:

6271 SAINT AUGUSTINE RD 24 JACKSONVILE, FL. US 32217

The mailing address of the Limited Liability Company is:

6271 SAINT AUGUSTINE RD 24 JACKSONVILE, FL. US 32217

Article III

Other provisions, if any:

THE LLC, PART OF THE PHILIP ANTHONY MARTIN LIVING TRUST, HANDLES ESTATE AND TRUST ADMINISTRATION. MANAGED PER TRUST TERMS AND ENGAGES IN LAWFUL BUSINESS ACTIVITIES.

Article IV

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

CLAY CAREY 6271 SAINT AUGUSTINE RD 24 JACKSONVILLE, FL. 32217

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.

Registered Agent Signature: CLAY CAREY

Article V

The name and address of person(s) authorized to manage LLC:

Title: MGR P.A.M. LIVING TRUST 6271 SAINT AUGUSTINE RD STE 24 JACKSONVILLE, FL. 32217 US L24000350627 FILED 8:00 AM August 13, 2024 Sec. Of State klovelace

Article VI

The effective date for this Limited Liability Company shall be:

08/08/2024

Signature of member or an authorized representative

Electronic Signature: P.A.M. LLC P.A. MARTIN, AUTH SIGN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.



Philip Martin

Executor of the PHILIP AN	NTHONY	MARTIN	LIVING	TRUST
---------------------------	--------	--------	--------	-------

6271 Saint Augustine Rd

Ste 24

Jacksonville, FL 32217

Email: pamestate@protonmail.com

Dear Karen Lovelace,

Following the guidance of my legal counsel, I am writing to you in my capacity as the Executor of the PHILIP ANTHONY MARTIN. This letter serves to formally authorize PHILIP ANTHONY MARTIN to use the business name "PHILIP ANTHONY MARTIN," which is documented under number D23000000010.

Please be informed of the following key points:

Registered Agent Designation: Clay Carey has been designated as the Registered Agent for PHILIP ANTHONY MARTIN. This designation aligns with the requirement for the registered agent to be an individual or an entity authorized to transact business in Florida.

Authorized Signature: As the Executor, I am signing this document in accordance with the trust agreement and applicable laws, thereby acting within my authorized capacity.

Purpose: The establishment of PHILIP ANTHONY MARTIN is crucial for the purposes of trust and estate administration, facilitating the seamless operation and legal compliance of the trust.

This letter serves as formal consent for PHILIP ANTHONY MARTIN to utilize the specified business name in its operations, under the terms and conditions outlined in the trust agreement. This authorization is granted in good faith, with the expectation that all activities conducted under the business name will adhere to the relevant laws and regulations.

124000350627

Should you require further information or clarification, please do not hesitate to contact me at the provided contact details.

Sincerely,

Philip Martin

Executor of the PHILIP ANTHONY MARTIN LIVING TRUST