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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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|----------------|-----------------------------|---|------------|-------------|---|---|
| SUBJECT | | N DRIVING SCHO | OOL LLO | | | |
| SUBJECT | · | Nan | ne of Lim | iited Liabi | lity Company | |
| The enclos | ed Articles of | Organization and | fee(s) arc | submitte | d for filing. | |
| Please retu | rn all correspo | ondence concerning | g this ma | tter to the | following: | |
| | WEIZHAN | G | | | | |
| | | | | Name o | f Person | |
| | EADTERN | DRIVING SCHOOL | OL LLC | | | |
| | | | | Firm/C | ompany | 2024 (|
| | 2512 Dardar | nelle dr. | | | | 2024 OST 27 |
| | | | | Add | ress | |
| | Pine hills,F1 | . 32808 | | | | : |
| | | | C | ity/State a | nd Zip Code | |
| | | E-mail address: (to | be used | for future | annual report notificati | on) |
| For further in | | ncerning this matte | | | ' | |
| | WEIZHANG | G | 01 at (| | 689-465-4138 | |
| | Nam | ie of Person | | | Daytime Telephon | e Number |
| Enclosed is | s a check for t | he following amou | nt: | | | |
| | Filing Fee | □S130.00 Filing Certificate of St | g Fee & | Certif | 55.00 Filing Fee & led Copy nal copy is enclosed) | ☐\$160.00 filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | New F Divisio P.O. B | ng Address Filing Section on of Corporations Box 6327 assee, FL 32314 | | | Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, Fl. 3230 | issee et, Suite 810 |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| EADTERN DRIV | 'ING SCHOOL LLC | | | |
|--|---|--|---|--------------------------|
| (Must c | ontain the words "Limited Liab | ility Company, | "L.L.C.," or "LLC.") | |
| RTICLE II - Address: ne mailing address and stree | et address of the principal office | of the Limited | Liability Company is: | |
| <u>Prin</u> | cipal Office Address: | | Mailing Addre | <u>ss</u> : |
| 2512 Dardanelle o | ir, | 2511 | 2 Dardanelle dr. | |
| pine hills, FL 328 | Δ0. | | | |
| RTICLE III - Registered , the Limited Liability Comp | Agent, Registered Office, & Regany cannot serve as its own Regan active Florida registration.) | Legistered Agei | | |
| RTICLE III - Registered A he Limited Liability Composition business entity with a | Agent, Registered Office, & Reany cannot serve as its own Regian active Florida registration.) The address of the registered age | legistered Agei | it's Signature: | |
| RTICLE III - Registered A he Limited Liability Composition business entity with a | Agent, Registered Office, & Reany cannot serve as its own Regan active Florida registration.) Set address of the registered age WELZHANG | degistered Ager gistered Agent. ' | it's Signature: | |
| RTICLE III - Registered A he Limited Liability Composition business entity with a | Agent, Registered Office, & Reany cannot serve as its own Regian active Florida registration.) Set address of the registered age WELZHANG Na | legistered Agei | it's Signature: | |
| RTICLE III - Registered A he Limited Liability Composition business entity with a | Agent, Registered Office, & Reany cannot serve as its own Regan active Florida registration.) The address of the registered age WELZHANG Na 2512 Dardanelle dr | Registered Agei gistered Agent. ' ent are: | it's Signature: You must designate an indi | 2024 (131.2) |
| RTICLE III - Registered A he Limited Liability Composition business entity with a | Agent, Registered Office, & Reany cannot serve as its own Regian active Florida registration.) The address of the registered age WELZHANG Na 2512 Dardanelle dr Florida street address (P. | Registered Agei gistered Agent. ' ent are: | it's Signature: You must designate an indi | vidual or 2024 (% 1 %) |
| RTICLE III - Registered A he Limited Liability Composition business entity with a | Agent, Registered Office, & Reany cannot serve as its own Regan active Florida registration.) The address of the registered age WELZHANG Na 2512 Dardanelle dr | Registered Agei gistered Agent. ' ent are: | it's Signature: You must designate an indi | 2024 (131-27) |

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 | |
| <u>-</u> | WELCHLANG |
| MGR | WEI ZHANG 2512 Dardanelle dr |
| | Pine hills,FL 32808 |
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| (Use attachment if necessary) | _ |
| (Use attachment if necessary) LEV: Effective date if other than the d | late of filing: 10/21/2024 (OPTIONAL) |
| CLE V: Effective date, if other than the deffective date is listed, the date must be e of filing.) If the date inserted in this block does not be a constant. | date of filing: 10/21/2024 (OPTIONAL) specific and cannot be more than five business days prior to or 90 day ot meet the applicable statutory filing requirements, this date will not be ent of State's records. |
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| CLE V: Effective date, if other than the deffective date is fisted, the date must be e of filing.) If the date inserted in this block does not cument's effective date on the Department. CLE VI: Other provisions, if any. | especific and cannot be more than five business days prior to or 90 day of meet the applicable statutory filing requirements, this date will not be ent of State's records. |
| CLE V: Effective date, if other than the deffective date is fisted, the date must be e of filing.) If the date inserted in this block does not cument's effective date on the Department. | especific and cannot be more than five business days prior to or 90 day of meet the applicable statutory filing requirements, this date will not be ent of State's records. |
| CLE V: Effective date, if other than the deffective date is listed, the date must be set of filing.) If the date inserted in this block does not cument's effective date on the Department. CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is exert am aware that any forms. | especific and cannot be more than five business days prior to or 90 day of meet the applicable statutory filing requirements, this date will not be ent of State's records. |
| CLE V: Effective date, if other than the deffective date is listed, the date must be set of filing.) If the date inserted in this block does not cument's effective date on the Department. CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is exert am aware that any forms. | member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. alse information submitted in a document to the Department of State gree felony as provided for its 817.155. F.S. |

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)