## L24000523835

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700441215187

2024 DEC 18 6M 9: 47

TICO

2024 DEC 18 PM 1: 0:





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	12/18/2024		
Name:	Cheyanne Davis	· ·	202
Reference	e #:		91 0 <u>7</u> 9 1 <b>8</b> 0
		1 Hunter Tour, LLC	_
_	ticles of Incorporation/Authoriza	ition to Transact Business	14 S. W.
	nange of Agent		
☐ Re	einstatement		
□ Co	onversion		
	erger		
☐ Dis	ssolution/Withdrawal		
☐ Fic	ctitious Name		
☐ Ot	her		
Authorize Signature	ed Amount: \$\2 e:	<u>5.0()</u>	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	International Hun			<del></del>
	(Must contain the words "Limited I lability C	ompany, "L.L.C.	," or "LLC "}	
ARTICLI The mailin	E 11 - Address: ng address and street address of the principal office of th	e Limited Liabilit	Company is:	
	Principal Office Address:		Mailing Address:	
	12808 Mizner Way Wellington Fl. 33414	12808 Mizi	er Way Wellington Fl.	33414
ARTICLI	E III - Registered Agent, Registered Office, & Registe	ered Agent's Sign	nature:	2024 [73
The Limi another b	E III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Registered sursiness entity with an active Florida registration.)	ered Agent's Sign d Agent. You mu:	nature:	2024 CEC 18
The Limi mother b	ited Liability Company cannot serve as its own Registere ousiness entity with an active Florida registration.)  and the Florida street address of the registered agent are	ered Agent's Sign d Agent. You mu:	nature:	2024 CEC 18 6H
(The Limi another b	ited Liability Company cannot serve as its own Registere ousiness entity with an active Florida registration.)  and the Florida street address of the registered agent are	ered Agent's Sign d Agent. You mu:	nature:	2024 CEC 18 6H
(The Limi another b	ited Liability Company cannot serve as its own Registere ousiness entity with an active Florida registration.)  and the Florida street address of the registered agent are Krister  Name	ered Agent's Sign d Agent. You must it Baran Mizner Way	nature: it designate an individual	2024 CEC 18
(The Limi another b	ited Liability Company cannot serve as its own Registere ousiness entity with an active Florida registration.)  and the Florida street address of the registered agent are Krister  Name	ered Agent's Sign d Agent. You must it Baran Mizner Way	nature: it designate an individual	2024 CEC 18 6H
(The Limi another b	ited Liability Company cannot serve as its own Registere ousiness entity with an active Florida registration.)  and the Florida street address of the registered agent are Krister  Name	ered Agent's Sign d Agent. You must it Baran Mizner Way	nature: it designate an individual	2024 CEC 18 6H

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)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:			
MGR	Kristen Baran			
	12808 Mizner Way Wellington Fl. 33414			
MGR	Andrew Lustig			
	12808 Mizner Way Wellington Fl. 33414			
	2			
	724			
	· :			
	<del></del>			
	<del></del>			
	9			
(Use attachment if necessary)	- <b>5</b>			
UEV: Effective date, if other than the date of filing:	. (OPTIONAL)			
LEV: Effective date, if other than the date of filing: ffective date is listed, the date must be specific and e of filing.)  If the date inserted in this block does not meet the approximent's effective date on the Department of State's	cannot be more than five business days prior to or 90 of oplicable statutory filing requirements, this date will not be			
LEV: Effective date, if other than the date of filing: ffective date is listed, the date must be specific and e of filing.)  If the date inserted in this block does not meet the approximent's effective date on the Department of State's	cannot be more than five business days prior to or 90 of oplicable statutory filing requirements, this date will not be			
LEV: Effective date, if other than the date of filing: ffective date is listed, the date must be specific and e of filing.)  If the date inserted in this block does not meet the approximent's effective date on the Department of State's	cannot be more than five business days prior to or 90 of oplicable statutory filing requirements, this date will not be			
TLE V: Effective date, if other than the date of filing:  ffective date is listed, the date must be specific and e of filing.)  If the date inserted in this block does not meet the ap- cument's effective date on the Department of State's  TLE VI: Other provisions, if any.  REOURED SIGNATURE:  Signature of member or an This document is executed in accom-	cannot be more than five business days prior to or 90 of oplicable statutory filing requirements, this date will not be records.  In authorized representative of a member, dance with section 605.0203 (1) (b), Florida Statutes, in submitted in a document to the Department of State			

35

Filing Feer:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

5 5.00 Certificate of Status (Optional)