U14000575000

(Requestor's Name)
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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Business Linky Name)
(Document Number)
Certified Copies Certificates of Status

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COVER LETTER

TO:	New Filing So Division of Co			
SUBJ	PCT.	Cricket	5 1000000000000000000000000000000000000	414
3000	EC1.		nited Liability Company	· · · · · · · · · · · · · · · · · · ·
The er	nclosed Articles o	of Organization and fee(s) are	e submitted for filing.	
Please	return all corres	pondence concerning this ma	itter to the following:	
			John Mabbett	
			Name of Person	
				230
			Firm/Company	
		360-	t Mossy Creek C	ane ;
	-	Tallah	asse FL 32311 City/State and Zip Code (+4 a gmai). Co for future annual report notificati	· · · · · · · · · · · · · · · · · · ·
		E-mail address: (to be used	for future annual report notificati	ion)
or furt	ther information of	concerning this matter, pleas	e call:	
			729 344-511 rea Code Daytime Telephon	
	Na	me of Person A	rea Code Daytime Telephon	e Number
Enclo	sed is a check for	the following amount:		
□\$13	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)
	New Divi	ling Address Filing Section sion of Corporations Box 6327	Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre	assec

Tallahassee, FL 32303

Tallahassee, Fl. 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
4414
Liliket's all LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
Jalahassee, FC 32/31) Tallahassee, JFL 32311
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:
Name John Mabkett
Florida street address (P.O. Box NOT acceptable)
Tollehossee FC 32311 City State Zip
City State Zip
laying been named as registered agent and to accept service of process for the above stated limited liability company at the lace designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I writer agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I m 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:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MORE AWOR	John Walkett 3(01)7 Massy Creek Lane Tullshafell, JEL 32311
<u>AMBR</u>	King Myhbelf 3007 Massis Creek Land Tallahussed FL 32311
	700: 7-5
(Use attachment if necessary)	;
effective date is listed, the date must be spate of filing.)	of filing: (OPTIONAL) - : ecific and cannot be more than five business days prior to or 90 days at neet the applicable statutory filing requirements, this date will not be liste of State's records.
REQUIRED SIGNATURE:	M MH
Signature of a me This document is execu I am aware that any false constitutes a third degree	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes. e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S. John Maddett

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)