

# L240000526709

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : LYONS & LYONS, P.A.  
Account Number : I20030000061  
Phone : (239)948-1823  
Fax Number : (239)948-1826

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: cjavens@comcast.net

**FLORIDA LIMITED LIABILITY CO.  
O' THE GOOD LIFE, LLC**

Certificate of Status	0
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ARTICLES OF ORGANIZATION  
OF  
O' THE GOOD LIFE, LLC

ARTICLE I – NAME

The name of the limited liability company is **O' The Good Life, LLC**, (the "Company").

ARTICLE II – ADDRESS

The mailing address and street address of the principal office of the Company is:

Principal Office Address:  
20159 Napa Loop  
Estero, Florida 33928

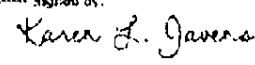
Mailing Address:  
20159 Napa Loop  
Estero, Florida 33928

ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Karen L. Javens  
20159 Napa Loop  
Estero, Florida 33928

*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.*

Agreed by:  
  
\_\_\_\_\_  
Karen L. Javens

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#### ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

MGR

Christopher S. Javens  
20159 Napa Loop  
Estero, Florida 33928

MGR

Karen L. Javens  
20159 Napa Loop  
Estero, Florida 33928

#### ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be **January 1, 2025**.

#### REQUIRED SIGNATURE:

DocuSigned by:

Christopher S. Javens

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. I am aware that any 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.

Christopher S. Javens

Typed or printed name of signer

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