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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: MASCOT PALS		
Name o	f Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
Daijah Turner		
	Name of Person	2024 050
MASCOT PALS, LLC.		8
	Firm/Company	· ·
2023 Bushy Hall Road		
	Address	
Tallahassee, Florida 32309		• •
	City/State and Zip Code	
daijah.turner@gmail.com	used for future annual report notification)	
For further information concerning this matter, p		
rot tutulet information concerning this matter, p	nease can,	
	nt (850) 294-6368	
Name of Person	Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:		
□S125.00 Filing Fee ■\$130.00 Filing F Certificate of Statu	S Certified Copy Certification (additional copy is enclosed) Certification Certificati	0.00 Filing Fee. cate of Status & ed Copy tal copy is enclosed)
Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 8: Tallahassee, FL 32303	0

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited	Liability Company is:			
MASCOT P.	ALS, LLC.	iability Com	pany "LLC " or "LLC")	
(.vi	ust contain the words. Emilied E	naumy Con	ipany, E.E.C., or EEC.	
ARTICLE II - Address The mailing address and	s: street address of the principal of	fice of the L	imited Liability Company is:	
	Principal Office Address:		Mailing Address:	
2023 Bushy	Hall Road, Tallahassee, FL 3230	9	2023 Bushy Hall Road, Tallahassee,	FL 3230
(The Limited Liability C	ered Agent, Registered Office, & Company cannot serve as its own is with an active Florida registration	Registered A	d Agent's Signature: gent. You must designate an individual	3
The name and the Florid	la street address of the registered	agent are:		. 25
	Daijah Turner			
		Name		
	2023 Bushy Hall Roa	d		
	Florida street address		SOT acceptable)	
	Tallahassee	FL	32309	
	City	State	Zip	
place designated in this ce further agree to comply wi	ertificate, I hereby accept the appoint the provisions of all statutes respectively the obligations of my position of the obligations of the provision of the obligations of the obligat	intment as re lating to the as registered	for the above stated limited liability comegistered agent and agree to act in this corresponding and complete performance of my agent as provided for in Chapter 605, F. Signature (REQUIRED)	apacity. I duties, and I

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Daijah Turner 2023 Bushy Hall Road Tallahassec, FL 32309
	
	2024 [
(Use attachment if necessary)	; Si
in effective date is listed, the date must be specified of filing.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days a
uate of ming.)	
	meet the applicable statutory filing requirements, this date will not be list
document's effective date on the Departmen	
document's effective date on the Departmen FICLE VI: Other provisions, if any.	
document's effective date on the Departmen FICLE VI: Other provisions, if any.	
document's effective date on the Departmen FICLE VI: Other provisions, if any, y and all lawful business REOUIRED SIGNATURE: Signature of a m This document is exect I am aware that any fall	
document's effective date on the Departmen FICLE VI: Other provisions, if any, y and all lawful business REOUIRED SIGNATURE: Signature of a m This document is exect I am aware that any fall	nember of an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes. se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.
REOUIRED SIGNATURE: Signature of a m This document is exect 1 am aware that any fall constitutes a third degree	nember of an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State

as

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

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)