Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

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

Email Address:___

FLORIDA LIMITED LIABILITY CO. RIGHT UP MY ALI, LLC

<u> Тапининининининининининининининининининин</u>	<u>ammanammanaman</u>
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

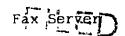
Help

COVER LETTER

	ew Filing Sec vivision of Cor				
SUBJECT		Лу Ali, LLC			
SUBJECT	·	Name of Lim	ited Liabilit	y Company	
The enclos	sed Articles of	Organization and fee(s) are	submitted !	for filing.	
Please retu	ırn all correspo	ondence concerning this ma	tter to the fo	ollowing:	
	Alice B. Hol	brook			
			Name of I	erson	
			Firm/Con	пралу	
	293 Flaming	o Drive			
	-		Addre	55	
	West Palm I	Beach, FL 33401			
	abholbrook@		ity/State and	Zip Code	
		E-mail address: (to be used	for future ar	nnual report notificat	ion)
For further i	information co	ncerning this matter, please	call:		
	Alice B. Hol			962-1615)	
	Nam		rea Code	Daytime Telephon	e Number
Enclosed i	s a check for t	he following amount.			
) Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certific	.00 Filing Fee & d Copy I copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailir</u>	og Address	<u> </u>	Street Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

3/004



2021 MAR -1 PM 3: 08

TATE

ARTICLESOFORGANIZATION FOR FLOR	CONTRACT TO CONTRACT TO THE TARK OF
ARTICLE I - Name:	TALLAHASSEE
The name of the Limited Liability Company is:	
The hame of the Binned Binomy Company 1/2	
Right Up My Ali, LLC	
(Must constin the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office of	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
293 Flamingo Drive	293 Flamingo Drive
West Palm Beach, FL 33401	West Palm Beach, FL 33401
	
ARTICLE III - Registered Agent, Registered Office, & Re	
(The Limited Liability Company cannot serve as its own Regi- another business entity with an active Florida registration.)	stered Agent. You must designate an individual or
The name and the Florida street address of the registered agen	it arc:
Corporation Service Comp	pany
Nan	
1201 Hays Street	
Florida street address (P.C.) Box NOT acceptable)

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 Corporation Service Company am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

City

Registered Agent's Signature (REQUIRED)

State

(CONTINUED)

<u>Title:</u> "AMBR" - Authorized Membe	Name and Address:
"MGR" = Manager	•
AMBR	Alice B. Holbrook
	293 Flamingo Drive West Palm Beach, FL 33401
	West tall better, 12 33 tot
	
(Use attachment if necessary) E.V. Effective date if other the	n the date of filing: (OPTIONAL)
EV: Effective date, if other the ective date is listed, the date is of filing.)	in the date of filing:
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