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TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: Great Gardens & Gifts (Name of Limited Liability Company)
	(Name of Lamited Liability Company)
The encl	losed Articles of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	Paul A. Vahue
	(Name of Person)
	Great Gardens & Gifts
	(Firm/Company)
	20607 Leonard Road
_	(Address)
	Lutz, FL 33558
	(City/State and Zip Code)
For furth	ner information concerning this matter, please call:
	Paul A. Vahue at (813) 948-4438
	(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Great Gardens & G	ifts LLC	·		
ARTICLE II - A The mailing addre	ddress: ess and street address of th	e princip	oal office of the Limit	ed Liability Compa
Principal Office	Address:		Mailing Addres	<u>s:</u>
20607 Leonard Roa	ad		20607 Leonard Ro	oad
Lutz, FL 33558			Lutz, FL 33558	
				
	Registered Agent, Register Florida street address of the street ad			gent's Signature:
	Florida street address of the Paul A. N 20607 Leonard	Vahue ame	ered agent are:	04 OCT 11 SLABASS TALLABASS
	Florida street address of the Paul A.	Vahue ame	ered agent are:	04 OCT 11 SLABASS TALLABASS
	Paul A. Paul A. N 20607 Leonard I Florida street address	Vahue ame Road (P.O. Box	ered agent are: NOT acceptable) FLORIDA 33558	

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:				
"MGR" = Manager					
"MGRM" = Managing Member					
MGR	Paul A. Vahue				
	20607 Leonard Road				
	Lutz, FL 33558				
MGRM	Valerie L. Vahue				
MGRW	20607 Leonard Road				
	Lutz, FL 33558				
(Use attachment if necessary)					
NOTE: An additional article must b	oe added if an effective date is requested.				
1101 E. An additional at tiele must be	e added it all effective date is requested.				
REQUIRED SIGNATURE:	1				
	/shue				
Simulation of a support of a					
Signature of a member of an	authorized representative of a member.				
(In accordance with section 60	(In accordance with section 608.408(3), Florida Statutes, the execution				
that the facts stated herein are	of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.),				
PAUL A.	VALUE				
Typed or p	printed name of signee				

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)