

# LO9000065237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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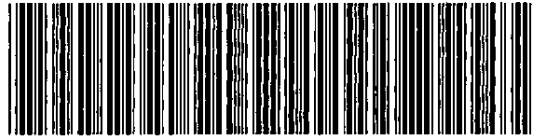
(Business Entity Name)

(Document Number)

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2009 JUL -6 PM 1:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
JUL 7 2009  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LARRIEUX Claude Champagne, LLC.  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gracien Serge Champagne  
Name of Person

LARRIEUX Claude Champagne LLC.  
Firm/Company

7470 NW 42<sup>nd</sup> Street  
Address

LAUDERHILL Florida 33319  
City/State and Zip Code

Bestcar331@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gracien Serge Champagne at ( 954 ) 471-0070  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 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)

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LARRIEUX Claude CHAMPAGNE, LLC.

(Must end with 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:**

7470 NW 42<sup>nd</sup> Street  
LAUDERHILL FL. 33319

7470 NW 42<sup>nd</sup> Street  
LAUDERHILL FL. 33319

**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:

Gracien Serge Champagne  
Name

970 SW 81<sup>st</sup> Terrace  
Florida street address (P.O. Box **NOT** acceptable)

North Lauderdale FL 33068  
City, State, and Zip

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*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 608, F.S.*

Gracien Serge Champagne  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows: 2009 JUL -6 PM 1: 23

**Title:**  
"MGR" = Manager  
"MGRM" = Managing Member

**Name and Address:**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MGR

Gracien SERGE CHAMPAGNE  
970 SW. 81ST TER  
NORTH LAUDERDALE, FL. 33068

MGRM

Lionel CLAUDE  
7470 NW. 42nd STREET  
LAUDERHILL, FL 33319

MGRM

LARRIEUX ROTHCHILD  
3851 NW. 5TH CT  
FL LAUDERDALE, FL. 33311

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

GRACIEN SERGE CHAMPAGNE  
Typed or printed name of signee

**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)