L08000009047

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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11/05/07--01054--002 **78.75

01/03/08--01003--001 **50.00

01/03/08--01003--002 **2.00

08 JAN 25 AM 8: 47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. Thomas | JAN 2 8 2004

COVER LETTER

Division of Corporations		
SUBJECT: P & T's Boutique, LLC		
(Name of L	imited Liability Company)	
The enclosed Articles of Organization and fee(s)	are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Robert H. Burleson		
	(Name of Person)	
Universal resources, LLC). •	
	(Firm/Company)	700
6849 West Colonial Drive	•	
	(Address)	麗 3
Orlando, Florida 32818		OB JAN 25 AM 8: 47
	(City/State and Zip Code)	STA STA
For further information concerning this matter, p	lease call:	∂ m -
Robert H. Burleson	at (407) 404-2480 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amoun	t:	
\$125.00 Filing Fee \$130.00 Filing Fee Certificate of Status		tus &
Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building	

Tallahassee, FL 32301



November 6, 2007

PATRICIA STEWART 6851 WEST COLONIAL DRIVE ORLANDO, FL 32818

SUBJECT: P & T'S BEAUTY SUPPLY, LLC.

Ref. Number: W07000054843

We have received your document for P & T'S BEAUTY SUPPLY, LLC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2008 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please complete Article VI - Registered Agent information.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Regulatory Specialist II New Filing Section Letter Number: 307A00064644



January 3, 2008

ROBERT H BURLESON UNIVERSAL RESOURCES, LLC 6849 WEST COLONIAL DRIVE ORLANDO, FL 32818

SUBJECT: P & T'S BOUTIQUE, LLC

Ref. Number: W08000000299

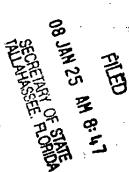
We have received your document for P & T'S BOUTIQUE, LLC and your check(s) totaling \$130.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II Letter Number: 808A00000302



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
P& T's Boutique, LLC.	
(Must end with the words "Limited Liability C	ompany, "L.L.C.," or "LLC.")
ARTICLE II - Address:	S - 1 - 665 646 - 1 S - 1 1 S -
The mailing address and street address of the princi	pal office of the Limited Liability Company is:
Principal Office Address:	lailing Address:
6851 West Colonial Drive S	ame
Orlando, Fforida 32818	
	TESE L
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.) The name and the Florida street address of the regis Jannaka Byron Name	Agent. You must designate an individual or another 3
684¶ West colonial Driv	ve
Florida street address	(P.O. Box NOT acceptable)
Orlando, Florida 32818	L
City, State, and 2	Zip
Having been named as registered agent and to accelliability company at the place designated in this registered agent and agree to act in this capacity. I statutes relating to the proper and complete perfor accept the obligations of my position as registered.	certificate, I hereby accept the appointment as further agree to comply with the provisions of all rmance of my duties, and I am familiar with and

(CONTINUED)
Page 1 of 2

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

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

MGRM	Patricla Stewart	
WIGRIN	2228 Mountain Spruce Street	
	Ocoee, Florida 34761	_
		_
		
		_
		
		_ S
		- SECRETES
		落 5
(Use attachment if necessary)		ESE SE
	date of filing: (OPTI	SH C
	data of filings	

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.)

Patricia Stewart

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)