## L12000072026

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(City/State/Zin/Phone #)
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Only States Light Hollow)
(Document Number)  Certified Copies Certificates of Status	PICK-UP WAIT MAIL
(Document Number)  Certified Copies Certificates of Status	
(Document Number)  Certified Copies Certificates of Status	(Business Entity Name)
(Document Number)  Certified Copies Certificates of Status	
	Cartification of Status
Special Instructions to Filing Officer:	Certified Copies Certificates of Status
Special Instructions to Filing Officer:	
	Special Instructions to Filing Officer:
	·

Office Use Only



900235558099

05/29/12--01013--012 \*\*125.08

12 HAY 29 RM 2: 44
350RETARY OF STATE

D. BRUCE

MAY 3 0 2012

**EXAMINER** 

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	ILEANA's SUNNY LIFE LLC		
50b0EC1	Name of Limit	ed Liability Company	
The enclosed Artic	cles of Organization and fee(s) are	submitted for filing.	
Please return all co	orrespondence concerning this matt	er to the following:	
Analia Mi	guel Gentile		
		Name of Person	
Webexp,	LLC		
<del></del>		Firm/Company	
5854 Lau	urel Green Circle		
	•	Address	
Boynton Be	each, Florida, 33437		
		y/State and Zip Code	AEE R
analiamigu	el@yahoo.com	for future annual report notification)	
For further information	ation concerning this matter, please	•	29 NARY ASSEE
Analia Miguel Ger	ntile	at ( 561 ) 523-6445	
1	Name of Person	Area Code & Daytime Telephone N	umbelle A
Enclosed is a che	eck for the following amount:		
]\$125.00 Filing Fe	s \$130.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	.00 Filing Fee, ficate of Status & fied Copy ional 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

The name of the Limited Liability Compa	any is:
ILEANA'S SUNNY LIFE LLC	
(Must end with the words "Limite	d 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:
5854 Laurel Green Circle	5854 Laurel Green Circle
Boynton Beach, Florida, 33437	Boynton Beach, Florida, 33437
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address o	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address o  Analia Miguel Gentile	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another  of the registered agent are:
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address o  Analia Miguel Gentile	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another  of the registered agent are:
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Analia Miguel Gentile  5854 Laurel Green Circle	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Analia Miguel Gentile  5854 Laurel Green Circle	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another  of the registered agent are:

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..

Registered Agent's Signature (REQUIRED)

(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" = Manager "MGRM" = Managing Member    MGRM	ager	Name and Address:
Ileana Galleano   5854 Laurel Green Circle   Boynton Beach, Florida, 33437     MGR	_	
MGR   Analia Miguel Gentile   5854 Laurel Green Circle   Boynton Beach, Florida, 33437	anaging Member	
MGR  Analia Miguel Gentile  5854 Laurel Green Circle  Boynton Beach, Florida, 33437  (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be more than five business days after the date of filing.)  REQUIRED SIGNATURE:  (In accordance with section 608.408(3), Florida Statutes, the execution of this document to the constitutes an affirmation under the penalties of perjury that the facts stated hereigage rule I am aware that any false information submitted in a document to the Department of state of constitutes a third degree felony as provided for in s.817.155, F.S.)		lleana Galleano
MGR  Analia Miguel Gentile  5854 Laurel Green Circle  Boynton Beach, Florida, 33437   (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:		5854 Laurel Green Circle
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:  (OPTIONAl effective date is listed, the date must be specific and cannot be more than five business days to 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 of the constitutes an affirmation under the penalties of perjury that the facts stated hereigning true.  I am aware that any false information submitted in a document to be peartment of the penalties of the pen		Boynton Beach, Florida, 33437
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:  OPTIONAL  OPTIONA		Analia Miguel Gentile
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:	<del></del>	
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:		
CLE V: Effective date, if other than the date of filing:		Boymon Beach, Homa, 33437
CLE V: Effective date, if other than the date of filing:		
CLE V: Effective date, if other than the date of filing:		
CLE V: Effective date, if other than the date of filing:		
CLE V: Effective date, if other than the date of filing:		
CLE V: Effective date, if other than the date of filing:		
CLE V: Effective date, if other than the date of filing:		and the state of t
CLE V: Effective date, if other than the date of filing:		
CLE V: Effective date, if other than the date of filing:	nt if necessary)	
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)		
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)		
O 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. I am aware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S.)		he date of filing: . (OPTIONAL)
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. I am aware that any false information submitted in a document to the Department of state constitutes a third degree felony as provided for in s.817.155, F.S.)	ve date, if other than the	he date of filing: (OPTIONAL) be specific and cannot be more than five business days
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. I am aware that any false information submitted in a document to the Department of state constitutes a third degree felony as provided for in s.817.155, F.S.)	e date, if other than the date must	he date of filing: (OPTIONAL be specific and cannot be more than five business days
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. I am aware that any false information submitted in a document to the Department of state constitutes a third degree felony as provided for in s.817.155, F.S.)	e date, if other than the date must	he date of filing: (OPTIONAL) the specific and cannot be more than five business days
(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	e date, if other than the date must	he date of filing: (OPTIONAL) be specific and cannot be more than five business days p
(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	ve date, if other than the listed, the date must date of filing.)	he date of filing: (OPTIONAL)  be specific and cannot be more than five business days p
(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	ve date, if other than the listed, the date must date of filing.)	he date of filing: (OPTIONAL) be specific and cannot be more than five business days p
(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	ve date, if other than the listed, the date must date of filing.)	he date of filing: (OPTIONAL) to be specific and cannot be more than five business days p
I am aware that any false information submitted in a document to the Department State constitutes a third degree felony as provided for in s.817.155, F.S.)	ve date, if other than the listed, the date must date of filing.)	be specific and cannot be more than five business days p
I am aware that any false information submitted in a document to the Department State Constitutes a third degree felony as provided for in s.817.155, F.S.)	ve date, if other than the listed, the date must date of filing.)  SIGNATURE:	be specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be specifically and cannot be specific and cannot be specifically and cannot be specific and cannot be specifically and cannot be specific and cannot be specific and cannot be specifically ano
constitutes a third degree felony as provided for in s.817.155, F.S.)	ve date, if other than the listed, the date must date of filing.)  SIGNATURE:  Signature of a memory accordance with section 6	the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be more than five business days provided the specific and cannot be specificated and cannot be specific and cannot be specifically and cannot be specific and cannot be specific and cannot be specific and
	ve date, if other than the listed, the date must date of filing.)  SIGNATURE:  Signature of a memory accordance with section 6 stitutes an affirmation un	the specific and cannot be more than five business days properly the specific and cannot be more than five business days properly the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be more than five business days properly that the specific and cannot be
Applia Movel Footile	listed, the date must date of filing.)  SIGNATURE:  Signature of a memorate an affirmation unit aware that any false information in aware that any false information.	the specific and cannot be more than five business days proper or an authorized representative of a member.
Analia Miquel Gentile  Typed or printed name of signee	listed, the date must date of filing.)  SIGNATURE:  Signature of a memore accordance with section of stitutes an affirmation unit aware that any false infistitutes a third degree felorities.	the specific and cannot be more than five business days provided for in s.817.155, F.S.)
Analia Migi Typed or printe	listed, the date must date of filing.)  SIGNATURE:  Signature of a memore accordance with section of stitutes an affirmation unit aware that any false infistitutes a third degree felorities.	the specific and the sp

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)