

✓ L000000014790 X

Requester's Name	
Address	
City/State/Zip	Phone #

000003476270--8
-11/27/00--01124--021
***310.00 ***155.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 NOV 27 AM 8:24

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

<input type="checkbox"/> Annual Report	Availability
<input type="checkbox"/> Fictitious Name	Examiner
	Updater
	Under
	Verifier
	Acknowledgment
	N. P. Verifier

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FLUC
11/30
Examiner's Initials

Superior Paralegal Services

7156 W. 127th Street, Suite #151
Palos Heights, IL 60463

November 22, 2000

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

RE: ARTICLES OF ORGANIZATION

**LOVE UNLIMITED, LLC
UNLIMITED JOY, LLC**

Dear Sir/Madam:

Enclosed are the **Articles of Organization**, for the above-referenced limited liability companies, together with one check in the amount of \$310.00 to cover the filing and the certified copy fees.

Please file in your office and return the confirmation of filing to:

**Superior Paralegal Service
Attn: Karen Ritter
7156 W. 127th Street, Suite #151
Palos Heights, IL 50463**

Thank you for your attention to this matter. If you have any questions, please call 708-974-3232.

Sincerely,

Karen Ritter

Karen Ritter

Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

UNLIMITED JOYS, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
29654 CONSTITUTION AVENUE, BIG PINE KEY, FL 33043

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

NANCY L. MCDANIEL

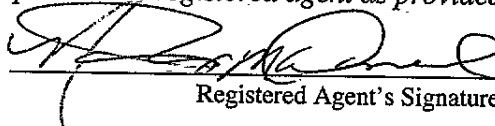
29654 CONSTITUTION AVENUE

Florida street address (P.O. Box **NOT** acceptable)
BIG PINE KEY FL 33043

City, State, and Zip

FILED
SECRETARY OF STATE
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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..


Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)


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.)

NANCY L. MCDANIEL

Typed or 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)