

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

L 01000000 2862

Office Use Only

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

- SANDRA'S INTERIORS, LLC 300003748033-9
(Corporation Name) (Document #) -02/22/01-01104-024
 ****125.00 ****125.00
- _____
(Corporation Name) (Document #)
- EFFECTIVE DATE**
2-15-01
(Corporation Name) (Document #)
- _____
(Corporation Name) (Document #)

- | | | |
|-----------------------------------|---------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait | <input type="checkbox"/> Photocopy |
| | | <input type="checkbox"/> Certificate of Status |

NEW FILINGS

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

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

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

REGISTRATION/QUALIFICATION

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

FILED
 01 FEB 22 AM 11:13
 SECRETARY OF STATE
 HALLMARK CENTER
 100 N. GASTON ST.
 RICHMOND, VA 23219

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Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SANDRA'S INTERIORS, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

311 N. ST. CLOUD
VALRICO FL 33594

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

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

SANDRA D'AMICO
Name
311 N. ST. CLOUD
Florida street address (P.O. Box **NOT** acceptable)
VALRICO FL 33594
City, State, and Zip

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..

Sandra M D'Amico

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.

Article V - Effective Date February 15, 2001

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

Sandra M D'Amico

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.)

SANDRA D'AMICO

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)

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TALLAHASSEE, FLORIDA