

LD2000012502

Amy Gibbs  
268 South Matanzas Blvd.  
St. Augustine, FL 32080  
904-829-0332

FILED  
2002 MAY 21 PM 1:20  
DIV. OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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W02-13595

J. BRYAN MAY 10 2002

J. BRYAN MAY 22 2002



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

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2002 MAY 21 PM 1:20  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

May 10, 2002

AMY GIBBS  
268 SOUTH MATANZAS BLVD.  
ST. AUGUSTINE, FL 32080

SUBJECT: SOCIAL BUTTERFLIES  
Ref. Number: W02000013575

We have received your document for SOCIAL BUTTERFLIES and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C." ✓

Please return the 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) 245-6043.

Joey Bryan  
Document Specialist  
Tax Liens

Letter Number: 202A00029641

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SOCIAL BUTTERFLIES, L.L.C.

**ARTICLE II - Address:**

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

150 KENT ROAD-SUITE 2A, ST. AUGUSTINE, FL 32086

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

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

AMY GIBBS

Name

268 SOUTH MATANZAS BLVD.

Florida street address (P.O. Box **NOT** acceptable)

ST. AUGUSTINE FL 32080

City, State, and Zip

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& ALIENATION, FLORIDA

*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.*

Amy Gibbs

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)

Misty A. Anderson

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.)

Misty A. Anderson

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)