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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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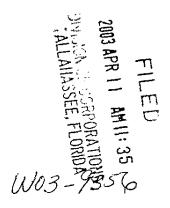
Office Use Only



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04/01/03-01029-012 \*\*70.00

U4/14/03--01022--002 \*\*55.00



## TRANSMITTAL LETTER

Mark Condators

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

\$70.00 \$78.75  Tiling Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of
ROM: ALVaro	BUENGVEY	
Nan	ne (Printed or typed)	_
	KLAND PAR Address Uderdale, ty, State & Zip	

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 2, 2003

ALVARO BUENAVENTURA 830 E. OAKLAND PARK BLVD. #101 FORT LAUDERDALE, FL 33334

SUBJECT: DECO GALLERY, LLC Ref. Number: W03000009356

We have received your document for DECO GALLERY, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$55.00.

You completed the wrong form to file for a Limited Liability Company. See attached form.,

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) 245-6043.

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Joey Bryan Document Specialist MINISTER TO THE SECONDARY OF THE SECONDA

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Letter Number: 103A00019907

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Deco Galley, LLC.
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature;
The name and the Florida street address of the registered agent are:
A VARO BIRLANDER OF 3
Name Opin
830 € Oakland PK Blu #101 95
Florida street address (P.O. Box NOT acceptable)
Fortlandendale FL 33334
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.

Registered Agent's Signature

(An additional article must be added if an effective te 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.)

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)