{	Requestor's Name)	
	Address)	
	Address)	
(	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	Business Entity Name)	
	Document Number)	
	Certificates of	Status
Special Instructions	to Filing Officer:	LC
	CUS	
	Office Use Only	



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# Shannon Dexter 7018 Bernay Avenue Jacksonville, Florida 32205 (904) 716-7203

August 16, 2004

Dear Ms. Smith,

The following documents are required by the State of Florida to incorporate your new business. Please sign and date the Articles of Organization as both the Registered Agent and Member. Also please print your name in the designated area. Once you have signed the Articles of Organization make a copy for your records. Please send the transmittal letter, the Articles of Organization and a check made payable to the Florida Department of State in the amount of \$130.00 to the address below. I recommend you overnight your documents for quicker processing. The state has informed me that their turnaround on filing your documents is approximately 3-5 days.

Mailing Address:
Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314
(850) 245-6052

Overnight Address:
Department of State
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399
(850) 245-6052

As soon as your limited liability company has been accepted by the Division of Corporations, I will order your LLC kit, which is required by the state and apply for a Employer Identification Number from the IRS, which is also required. The fee for your corporate kit is \$67.00 which includes shipping charges and my fee is \$75.00 for a total of \$142.00. Please mail your check payable to Shannon Dexter, 7018 Bernay Avenue, Jacksonville, Florida, 32205. Please note all information that has been submitted is confidential. If you have any questions with regard to this matter please contact me at (904) 716-7203.

Sincerely,

Shannon Dexter

Thannon Lister



### TRANSMITTAL LETTER

Registration Section
Division of Corporations

SUBJECT: Sisters & Friends, LLC

The enclosed Articles of Organization and fees are submitted for filing. I have enclosed a check in the amount of \$130.00 for the filing fee, Designation of Registered Agent and for a Certificate of Status.

Please return all correspondence concerning this matter to the following:

Linda S. Smith 1727 Cedar Bay Road Jacksonville, FL 32218

For further information concerning this matter, please call:

Linda S. Smith 904-757-3581

# **STREET ADDRESS:**

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 (850) 245-6051

# MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314
(850) 245-6051

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# ARTICLES OF ORGANIZATION

### FOR

## FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I NAME

The name of the Limited Liability Company is Sisters and Friends, LLC.

## ARTICLE II ADDRESS

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

Principal Office Address: 1727 Cedar Bay Road Jacksonville, FL 32218 Mailing Address: 1727 Cedar Bay Road Jacksonville, FL 32218

#### ARTICLE III REGISTERED AGENT

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

Linda S. Smith 1727 Cedar Bay Road Jacksonville, FL 32218

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, Florida Statues.

Registered Agent's Signature

Articles of Organization 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:

Title:

Name and Address:

Managing Member

Linda S. Smith

1727 Cedar Bay Road Jacksonville, FL 32218

Managing Member

Willie D. Harden 1727 Cedar Bay Road Jacksonville, FL 32218

REQUIRED SIGNATURE:

Signature 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.)

Cinva S. S. MIH 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)