# L05000035007

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# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JACAMAR DECOR, L.L.C. (Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
MARGARET L. LANOIX (Name of Person)	
JACAMAR DECOR, L. L. C. (Firm/Company)	_
1083 N. COLLIER BLVO #392	
MARCO ISLAND FL 34145 (City/State and Zip Code)	OS APR 11 FA
For further information concerning this matter, please call:	FN 2: 37
MARSARET L. LANOIX at (239) 389-4718 (Area Code & Daytime Telephone Number)	2: 37
Enclosed is a check for the following amount:	
☐ \$125.00 Filing Fee	s &
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines Street  Tallahassee, Florida 32399  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, Florida 32314	



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

April 1, 2005

MARGARET L. LANOIX JACAMAR DECOR, L.L.C. 1083 N COLLIER BLVD, #392 MARCO ISLAND, FL 34145

SUBJECT: JACAMAR DECOR, L.L.C. Ref. Number: W05000016674

We have received your document for JACAMAR DECOR, L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 805A00022373

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
The name of the Ellinted Elaonity Company is.	
JACAMAR DECOR, L.	L, C.
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1083 N. COLLIER BLVP. #392 NARCO ISLAND FL 34145	1083 N. COLLIER BLVP # 392 MARCO ISLAND, FL 34145
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the r  Teme B (  Name  1104 V Col	egistered agent are:  Prouse  Ires Specification  Proposition  Proposi
Mzmo Island City, State, a	FL 34/4T
liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all reformance of my duties, and I am familiar with and sterely agent as provided for in Chapter 608, F.S
/ and the	1 /

(CONTINUED)

## 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: "MGR" = Manager "MGRM" = Managing Member MARCO ISLAND FL

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

# REQUIRED SIGNATURE:

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:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)