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(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	MAIT	MAIL
(Ві	isiness Entity Nam	e)
(Do	ocument Number)	
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SECRETARIA DE STATE

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Designed in a Day, L.L.C. (or L. (Name of Limited Liability Company)	<u>u</u>)
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Nancy H, Thies (Name of Person)	
Designed in a Day, LLC (Firm/Company)	OF JU
68 Ficsta Way	IL 15 AM
Fort Lauderdale, R 33301 (City State and Zlp Code)	AM 8: 07 EF, FLORIDA
For further information concerning this matter, please call:	
Name of Person) at (954) 467-0211 (Name of Person) (Area Code & Daytime Telephone Number)	<u>DV</u> 954 560 32
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified	0 Filing Fee, c of Status & Copy copy is enclosed)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Designed in a Day, L	·LC
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
68 Ficsta Way Fort Lauderdale, Pa 33301	Same
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re Nancy H. This Name 68 Fics ta War Florida street address City, State, ar	AHASSEL 5 AHASSEL 5 EEL SIAIF ERL 33301 ORIGINAL SIAIF OR
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)

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:

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGRM	Nancy H. Thics 18 Fixsta Way Fort Landerdace, Fr. 33301		
	·		
		0	
(Use attachment if necessary)	LLA	ج ک	
NOTE: An additional article must	be added if an effective date is requested.	05 JUL 15	
ι	r or an authorized representative of a member.	AH 8: 07	
(In accordance with sec of this document consti	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury		

Filing Fees:

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

that the facts stated herein are true.)

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

Nancy H. Thics
Typed or printed name of signee