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TRANSMITTAL LETTER

Registration Section Division of Corporations

Registration Section

Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

TO:

SUBJECT: MYRTILLE LID'S DESIGNER L.L.C. (Name of Limited Liability Company)		
(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:		
MYRTILLE QUILLIEN (Name of Person)		
MYRTILLE KID'S DESIGNER, LLL		
928 Tefferson Av apt #1		
Miami Beach FL 33139 (City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Person) at (305) 534 76 19 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
S125.00 Filing Fee S130.00 Filing Fee SCertificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee SCERTIFICATE OF STATUS		
STREET ADDRESS: / MAILING ADDRESS: 22		

Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:			
MYRTILLE KID'S DESIGNER, L.L.C.			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			
Principal Office Address: Mailing Address:			
928 Tefferson Av opt #1 Miami Beach FL 33139 33139			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:			
The name and the Florida street address of the registered agent are: Klis Wesse Name S30 N.E. & S3'd S4. Florida street address (P.O. Box NOT acceptable) Miami			
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			
Aegistered Agent's Signature Aegistered Agent's Signature AHASSEE AHASSE			
(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 "MGRM" = Managing Member	Name and Address:	
MGR	428 Tefferson Av. of #1 MIATI BEACH, FL. 33139	
(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.)

MYRTILLE QUILLIEN
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)