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## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	Cetay Wed	LY, LLC d Liability Company)	OS SEP 30
The enclosed Articles of	Organization and fee(s) are su	ubmitted for filing.	SEE
Please return all correspondent	ondence concerning this matte	r to the following:	FLOS
Erik	ca M. to	Name of Person)	JRIO A
		Firm/Company)	T00
<u>600</u>	) Victory	Garden 1	1r. U83
_Ta	1 lahasse	(Address)  Per F 2  (State and Zip Code)	230/
For further information of	concerning this matter, please	call:	
(Name	of Person)	at () (Area Code & Daytime To	elephone Number)
Enclosed is a check fo	or the following amount:		
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	TACK OF
The name of the Limited Liability Company	is:
Nee-Key	Wear, LLC
ARTICLE II - Address:	FLOOR 2: 2:
The mailing address and street address of the	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
5833 Marblewood Ln Tallahassee, FL 32309	(Same)
ARTICLE III - Registered Agent, Register	red Office, & Registered Agent's Signature:
The name and the Florida street address of the Erika Nar	M. Hall
600 Victory Florida street	Garden Br. T83 address (P.O. Box NOT acceptable)
Tallahasse City, State	<b>2.</b> , FL <b>323</b> 01 le, and Zip
Having heen named as registered agent and	to accept service of process for the above stated limite.

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

(CONTINUED)

ARTICLE IV- Manager(s) or Managir The name and address of each Manager of				
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	Mamie M. Holl 5833 Marblewood In. Tallahassee, FZ 32309			
MGRM	ERIKA M. HALL GOO Victory Garden Dr. J& Tallahassee, Fl. 32301			
	TALL S			
(Use attachment if necessary)	AHASA A			
NOTE: An additional article must be added if an effective date is requested to				
REQUIRED SIGNATURE:	E. 2: 2: 0PF: 2:			

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.)

Erika M. Ha
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)