

L05000112159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*[Handwritten signature]*  
11/21

Office Use Only



600061269106

11/15/05--01023--004 \*\*125.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 NOV 15 PM 12:50

APPROVED  
AND  
FILED

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nancy Sloane LLC  
(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:

Nancy Sloane  
(Name of Person)

November Sloane Marketing  
(Firm/Company)

1935 Commerce Lane, Suite 3  
(Address)

Jupiter, FL 33458  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nancy Sloane at ( 561 ) 841-5212  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy<br>(additional 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**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Nancy Sloane LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

**Mailing Address:**

1935 Commerce Lane  
Suite 3  
Jupiter, FL 33458

same

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Nancy Sloane  
Name  
803 Mainsail Circle  
Florida street address (P.O. Box **NOT** acceptable)  
Jupiter FL 33477  
City, State, and Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 NOV 15 PM 12:50

APPROVED  
AND  
FILED

*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..*

Nancy Sloane  
Registered Agent's Signature

(CONTINUED)

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Nancy Sloane  
803 Mainsail Circle  
Jupiter, FL 33477

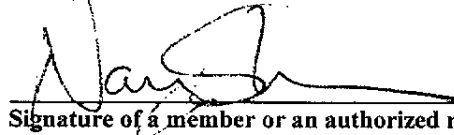
MGRM

Thierry Pouille  
117 Barcelona Dr.  
Jupiter, FL 33458

(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.)

Nancy Sloane  
Typed or printed name of signer

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 NOV 15 PM 12:50

APPROVED  
AND  
FILED

**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)