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(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:	
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COVER LETTER

TO: Registration Section Division of Corporations		-
SUBJECT: Anne Frances Design LLC (Name of Linfited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Anne Gordon (Name of Person) Anne Frances Design (Firm/Company)	· 4···	÷
Anne Frances Design JFirm/Company)		
9621 Greenbank Dr (Address)	4 <u>.</u> .	
RIVERVIEW, FL 33569 (City/State and Zip Code)		
For further information concerning this matter, please call:	05	
Anne Gordon at (617) 529-0312 SE (Area Code & Daytime Telephone Number)	05.NOV 28 PM 4: 00	PIE
Enclosed is a check for the following amount: \$\Bigsize \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	PM 4:00	e e

Mailing Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 16, 2005

ANNE GORDON 9621 GREEN BANK DR RIVERVIEW, FL 33569

SUBJECT: ANNE FRANCES DESIGN LLC

Ref. Number: W05000051310

We have received your document for ANNE FRANCES DESIGN LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on November 10, 2005. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days o your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please ca (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 005A00067876

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Anne Frances Design LLC	
(Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
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:
9621 Greenbank Dr Riverview, FL 38569	Same
Riverview	egistered agent are: Dr ress (P.O. Box NOT acceptable)
City, State, as	nd Zip

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 (REQUIRED)

(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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be more than five business days to or 90 days after the date of filing.) **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.)

C (JOY (VOY)
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)