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TALLAHASSEE THE SUR

COVER LETTER

TO: Registrat Division	tion Section of Corporations		
SUBJECT:		Concepts LLC.	
The enclosed Arti	icles of Organization and fee(s) are	submitted for filing.	
Please return all c	correspondence concerning this matt	ter to the following:	
	FREDERICA EUIS	(Name of Person)	
	Chisholm Conseq	ots LLC (Firm/Company)	
	P.O. Box 9024	(Address)	<u> </u>
	,	(Address)	
	Miramar Boad	y/State and Zip Code)	
For further inform	nation concerning this matter, please	e cail:	
FREDE	Rica Ellis (Name of Person)	at (\$50) 269-06 (Area Code & Daytime To	00 7 elephone Number)
Enclosed is a ch	neck for the following amount:		
□ \$125.00 Filinį	g 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	nns r Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Chisholm Concepts // C 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 pr	incipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
37 E. BRADLEY St. #10	P.O. Box 9024			
Miramar Reach FL	MIRAMAR Reach, FL			
35.50	33.5.00			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the re FREDERICA FILE Name	ered Agent. You must designate an individual or another			
37 E. RRADLey St. 7 Florida street add Miram Ar Beach City, State, a	Iress (P.O. Box <u>NOT</u> acceptable)			
liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all afformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S			

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

OG JAN 10 PH 1: 03
FALLAHASSEE FLORING

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	-
MGRM	FREDERICA Ellis
	P.O. Box 9024
	Miramar Bead, FC 32550
mGRm	Jessica Ellis
	P.O. Box 9024
	MIRAMAR BEACH, FL 32550
(noté)	Physical Address for Roll MGRM:
	37 E. BRADLEY St #10
	MIRAMAR BRACK, EL 32550
	No mail is belineagen to physical
	ADDRESS R. U. S. Past Office
(I le ttp - le t l'	
(Use attachment if necessary)	
CLE V: Effective date, if other than	
CLE V: Effective date, if other than effective date is listed, the date mu	
CLE V: Effective date, if other than	the date of filing:
CLE V: Effective date, if other than effective date is listed, the date mu 00 days after the date of filing.)	
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CLE V: Effective date, if other than effective date is listed, the date mu 00 days after the date of filing.) REQUIRED SIGNATURE: Signature of a month of the date of the date of a month of the date of t	ember or an authorized representative of a member.
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a month of this document.	ember or an authorized representative of a member. Sith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a mo (In accordance wi of this document that the facts sta	ember or an authorized representative of a member.

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)

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