W60006603

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
		

Office Use Only



900076573169

06/27/06--01016--003 **160.00

2006 JUN 27 AM 8: 35

(b)

COVER LETTER

TO: Registration Solution of Co				
SUBJECT: EXO	(Name of Limite	d Liability Company)		
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	oondence concerning this matte	er to the following:		
	Dawn f	Name of Person)		
	Exotic (Goddess LL)	
	1309	Sw75th ave		
	North	Navderdale (State and Zip Code)	FL, 33068	
For further information	concerning this matter, please	call:		
Dawn 1	Ripled of Person)	at (954) 718 - (Area Code & Daytime T	4927 elephone Number)	
Enclosed is a check for	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, See Certificate of Status & Certified Copy (additional copy is enclosed)	SECRETARY DIVISION OF CO
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns &	COF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
EXOTIC Goddess 11C (Must end with the words "Limited Liability Company, "Limited	l Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address:		
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1309 Sw 75th ave Northylauck (dale +6, 33068	same	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another	
	2006 2006	
The name and the Florida street address of the reg	gistered agent are:	
Amber Riple	SECRE TARY SISTEM OF CO. 206 JUN 27	ባ = ባ
5569 nw 4	ess (P.O. Box NOT acceptable)	j
Coconut Creek	CFL 33073	٠,

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 Ma The name and address of each Mana	naging Member(s): nger or Managing Member is as follows:		
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGR	Dan hipley 1309 Sw 75th ave North Landerdale FL, 33	_ _ ∑6€	
MGRM	Amber Ripbery 5569 now 44 wars Coconut Creek FL, 3307	- 3	
		<u>-</u>	
		_ _ _	
(Use attachment if necessary)			
	e date of filing: (OPTI be specific and cannot be more than five busines		
REQUIRED SIGNATURE:	er or an authorized representative of a member.	2006 J	DIVISI
,	ection 608.408(3), Florida Statutes, the execution	UH 2	ORETA OF

of this document constitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)