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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	y/State/Zip/Phone	(#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer	
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Office Use Only



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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Designs By Amye LLC			
(Name of L	imited Liability Company)		
The enclosed Articles of Organization and fee(s) as			
Please return all correspondence concerning this m	latter to the following:		
Amye Melton			
(Name of Person)		TAG 2	
Designs By Amye LLC	\$ *	2006 SEP 11 SECRETARY	1
(Firm/Company)	-		П
5773 Highland Lake Dr		P 2:34	O
Milton, FL 32583		> +	
(City/State and Zip Code)			
For further information concerning this matter, ple	ase call:		
Amye Melton	at (850) 384-9154		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations		

Tallahassee, Florida 32314

P.O. Box 6327

409 E. Gaines Street Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Designs By Amye LLC

The name of the Limited Liability Company is:

Principal Office A	ddress:	Mailing Address:
5773 Highland Lake Dr		5773 Highland Lake Dr
Milton, FL 32583		Milton, FL 32583
		gistered Office, & Registered Agent's Signature:
The name and the F	·lorida street address	of the registered agent are: SECRETAR Name Name
	Amye Melton	ARE SE
		Name SA
	5773 Highland La	ake Dr
	Florida street add	dress (P.O. Box NOT acceptable)
	Milton	FL 32583
	Cit	y, State, and Zip
liability company a registered agent an statutes relating to	it the place designated ad agree to act in this the proper and compi	and to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of al lete performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Amye Melton	
· · · · · ·	5773 Highland Lake Dr	in the second second
	Milton, FL 32583	•
MGRM	Gregory Melton	
	5773 Highland Lake Dr	بهيه
	Milton, FL 32583	• • •
		१८८८ - इ.स.च्या
		• -
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	ALS Z	
(Use attachment if necessary)	CRE TAR	T
NOTE: An additional article must be	e added if an effective date is requested. —	
REQUIRED SIGNATURE:	P 2: FLORI	
anu		
Signature of a member	or an authorized representative of a member.	
(In accordance with sec of this document constituted that the facts stated here.)	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury ein are true.)	
Amve Melton		

Typed or printed name of signee

<u>Filing Fees:</u> \$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)