

LO6000122211

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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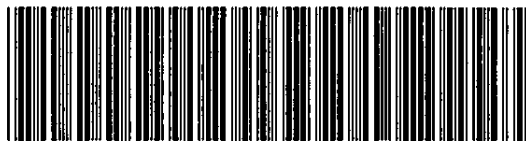
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Subject: Curly Sue's Surprises, LLC

Enclosed are Articles of Organization and fees are submitted for filing.

Pease return all correspondence concerning this matter to the following:

FLAMINGO ACCOUNTING  
10801 S.W. 51<sup>ST</sup> COURT  
FORT LAUDERDALE, FL 33328  
954-434-2493

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<input checked="" type="checkbox"/> \$125.00 Filing Fee	<input type="checkbox"/> \$130.00 Filing Fee & Certificate	<input type="checkbox"/> \$155.00 Filing Fee & Certified Copy	<input type="checkbox"/> \$160.00 Filing Fee, Certified Copy & Certificate
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**NOTE:** please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 11, 2006

FLAMINGO ACCOUNTING  
10801 S.W. 51ST COURT  
FORT LAUDERDALE, FL 33328

SUBJECT: CURLY SUE'S SURPRISES, LLC  
Ref. Number: W06000053307

We have received your document for CURLY SUE'S SURPRISES, LLC and your check(s) totaling \$125.00. 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 December 8, 2006. Please amend your document accordingly.

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

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 106A00070524

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**  
**FOR FLORIDA LIMITED LIABILITY COMPANY**  
**OF**  
**CURLY SUE'S SURPRISES, LLC**

The undersigned, desiring to form a Limited Liability Company under the provisions of the Laws of the State of Florida, hereby make, subscribe and acknowledge before a Notary Public, and file with the Secretary of State of the State of Florida, the following Articles of Organization for such Limited Liability Company:

**ARTICLE I**

**Name of Limited Liability Company**

The name of the Limited Liability Company shall be: Curly Sue's Surprises, LLC.

**ARTICLE II**

**Principal Place of Business**

The initial mailing and street address of the principal office of this limited liability company is 700 North West 88<sup>th</sup> Terrace, Pembroke Pines, FL 33024.

**ARTICLE III**

**Purpose of Business**

The limited liability company may engage in every aspect and phase of each and every lawful business or operation permitted under the laws of the United States and the State of Florida. The general nature of the business to be conducted and carried on by this limited liability company is all aspects of creations and designs, not limited to gift baskets for special occasions.

**ARTICLE IV**

**Term of Existence**

This limited liability company shall exist on a perpetual basis commencing on the date of execution and acknowledgment of these Articles of Organization.

**ARTICLE V**

**Registered Office/ Registered Agent**

The initial designation of the registered office of this limited liability company shall be 700 N.W. 88<sup>th</sup> Terrace, Pembroke Pines, Florida 33024 and the registered agent shall be Susan San Pedro.

Pursuant to Florida Statutes Section 608, having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the Articles of Organization, 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.

By: \_\_\_\_\_

*Susan San Pedro*

Registered Agent

EFFECTIVE DATE

1-15-07

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NOTARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE VI

Name and address of Manager or Managing Member

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

Susan San Pedro "MGRM"  
700 N.W. 88<sup>th</sup> Terrace  
Pembroke Pines, FL 33024

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TALLAHASSEE, FLORIDA

ARTICLE VII

Effective date

Effective date of said limited liability company is January 15<sup>th</sup> 2007.

I, the undersigned, being each and all of the original managing Member hereinabove named for the purpose of forming a limited liability company for profit to do business both without and within the State of Florida, do hereby make, subscribe, acknowledge and file these Articles of Organization, hereby declaring and certifying that the facts therein stated are true and correct and accordingly have hereunto set our hands and seals this 26 day of DECEMBER, 2007.

SIGNATURE:

Susan San Pedro  
Susan San Pedro

Managing Member

STATE OF FLORIDA     )  
                                  ) ss  
COUNTY OF             )

BEFORE ME, the undersigned authority, personally appeared Susan San Pedro, who after being by me first duly cautioned and sworn, upon their respective oath deposes and says that they are a party to the foregoing Articles of Organization and acknowledged the said execution to be their free and voluntary act and deed, and that the facts therein stated are truly set out, and are personally known to me or produced a Florida Drivers License as identification.

WITNESS my hand and official seal at Broward County, Florida on the day and date first above set forth.

Notary Public:

Betsy L. Stump

Seal:

My commission Expires:

