(Re	equestor's Name)	·
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Division of Co			
_{SUBJECT:} Karen I	Melk Interiors, LLC		
		d Liability Compa	any)
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing	3.
Please return all corresp	ondence concerning this matte	er to the following	;
Karen Mell			
		Name of Person)	
Karen Melk	Interiors, LLC		
	(Firm/Company)	•
500 South	Palm Avenue, Per	nthouse	
		(Address)	
Sarasota,	FL 34236		
	(City	State and Zip Code	
For further information	concerning this matter, please	call:	•
Karen Melk		at (305	458-0066
(Name	of Person)		e & Daytime Telephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy)	y Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	courier Address con Section of Corporations cuilding ceutive Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Karen Melk Inte	riors, LLC		
		any, "Limited Company" or their abbreviation "LLC," or "L.C.,	·")
ARTICLE II -	Address:		
		of the principal office of the Limited Liability (Company is:
Principal Offic	e Address:	Mailing Address:	
500 South Palm Av	enue, Penthouse	500 South Palm Avenue, Penthouse	
Sarasota, Florida	14236	Sarasota, FL 34236	
The name and the	ne Florida street addres Karen Melk	s of the registered agent are:	CRETARY SION OF CHAIN
		Name	₹
	500 South Palm A	venue, Penthouse	STA STA
		venue, Penthouse a street address (P.O. Box <u>NOT</u> acceptable)	OF STATE OF STATE
	Florida Sarasota, Florida 34	a street address (P.O. Box <u>NOT</u> acceptable) 236 FL	II: OI
	Florida Sarasota, Florida 34	a street address (P.O. Box <u>NOT</u> acceptable)	STATE ORATION:

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:

	nager ⁄Ianaging Member	Name and Address:
MGR		Karen Melk
·		500 South Palm Avenue, Penthouse
		Sarasota, FL 34236
		
	ent if necessary)	
(Use attachme		
CLE V: Effecti effective date is		
CLE V: Effecti effective date is 0 days after the	s listed, the date must b	
CLE V: Effecti effective date is 0 days after the	s listed, the date must be date of filing.) SIGNATURE:	e date of filing: (OPTIONAL ne specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and cannot be more than five business days Name of the specific and the specific

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)