

**LO7000048707**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

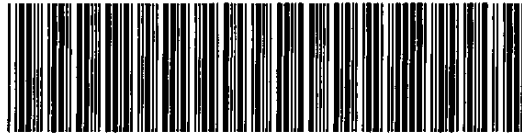
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

NRC

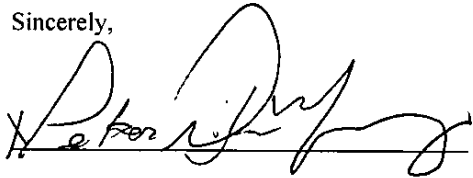
Date 5/3/07

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

SUBJECT  
**MADE TO SHINE LLC**

I have enclosed the original and one copy of the Articles of Organization. You will find my check for \$155.00 to cover the cost of the filing fees, Certified Copy of the Articles of Organization, and Fee for Registered Agent Designation for the above named LLC.

Sincerely,

A handwritten signature in black ink, appearing to read "Peter Moroney", written over a horizontal line.

Please send the Articles of Organization to the following address:

**PETER MORONEY**  
**5022 SW 13<sup>TH</sup> AVE**  
**CAPE CORAL, FL. 33914**

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – NAME**

The name of the Limited Liability Company is:  
**MADE TO SHINE LLC**

**ARTICLE II – ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:  
**5022 SW 13<sup>TH</sup> AVE  
CAPE CORAL, FL. 33914**

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:  
**PETER DILLON MORONEY  
5022 SW 13<sup>TH</sup> AVE  
CAPE CORAL, FL. 33914**

*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



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**ARTICLE IV – MANAGER(S) OR MANAGING MEMBER(S)**

<u>Title</u>	<u>Name and Address</u>
MGRM	<b>PETER DILLON MORONEY 5022 SW 13<sup>TH</sup> AVE CAPE CORAL, FL. 33914</b>
MGRM	<b>AMANDA NICHOLL HOWARD 5022 SW 13<sup>TH</sup> AVE CAPE CORAL, FL. 33914</b>

**ARTICLE V – MANAGEMENT (CHECK IF APPLICABLE)**

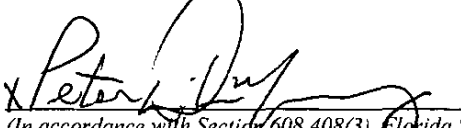
Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

**ARTICLE VI – EFFECTIVE DATE**

The effective date is:

**WHEN FILED**

Signature of a member or an authorized representative of a member:



*(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)*

Typed or printed name of signee:

**PETER MORONEY**

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$25.00 Designation of Registered Agent

\$30.00 Certified Copy

\$5.00 Certificate of Status

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