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2007 AUG -8 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Olde English Furniture & Celtic Treasures LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Beatrice Carroll

(Name of Person)

(Firm/Company)

2180 Belaire Drive

(Address)

Winter Haven Florida 33880

(City/State and Zip Code)

For further information concerning this matter, please call:

Beverley Welch

(Name of Person)

at (863) 665-6060 x2522

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 26, 2007

BEATRICE CARROLL
2180 BELAIRE DRIVE
WINTER HAVEN, FL 33880

SUBJECT: OLDE ENGLISH FURNITURE & CELTIC TREASURES LLC
Ref. Number: W07000036054

We have received your document for OLDE ENGLISH FURNITURE & CELTIC TREASURES LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please provide the city, state and zip code of the principal place of business address, mailing address and registered agent's address.,

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) 245-6967.

Leslie Sellers
Document Specialist

Letter Number: 707A00046690

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

OLDE ENGLISH FURNITURE & CELTIC TREASURES LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

264 W. CENTRAL AVE
WINTER HAVEN
FL. 33880

Mailing Address:

2180 Belaire DR
WINTER HAVEN
FL. 33884

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

BEATRICE CARROLL
Name
2180 Belaire Drive
Florida street address (P.O. Box **NOT** acceptable)
Winter Haven FL 33880
City, State, and Zip

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.

Beatrice Carroll
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Beatrice Carroll
2180 Belaire Dr
Winter Haven FL 33880

MGRM

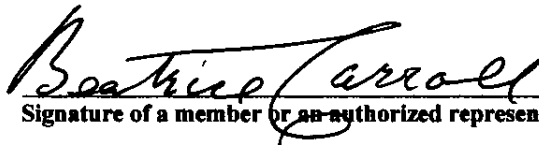
Beverley Welch
2180 Belaire Dr
Winter Haven FL 33880

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

BEATRICE CARROLL
Typed or printed name of signee

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)

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