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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LIVING EXPRESSIONS INTERNATIONAL 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:
DIANA LEE NEFF
(Name of Person)
LIVING EXPRESSIONS INTERNATIONAL LLC (Firm/Company)
220 59th AVENUE SOUTH (Address)
ST. PETERSBURG FL 33705
(City/State and Zip Code)
For further information concerning this matter, please call:
DIANA LEE NEFF at 727 > 867 - 8135
(Name of Person) at (727) 867 - 8135 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \times \\$130.00 Filing Fee \& \ \times \\$155.00 Filing Fee \& \times \\$160.00 Filing Fee, Certificate of Status \& Certificate of Status \&
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Malling Address Sansa(Country Address Sansa)
Mailing Address Street/Courier Address Registration Section Registration Section Division of Corporations Division of Corporations
P.O. Box 6327 Cliffon Building
Tallahassee, FL 32301
PESTATE ESTATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(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:

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:

220 59 AVBNUB SOUTH
Florida street address (P.O. Box NOT acceptable)

ST. PETERSBURG, FL 33705
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.S.

(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: Title: "MGR" = Manager "MGRM" = Managing Member MGRM DIANA LEE NEFF 220 59 ** AVENUE SOUTH 5T. PETERS BURG, FL 33705 MGRM ROBERTA M. STALVEY 24 ELENA COURT NEW MILFORD, CT 06776 (Use attachment if necessary)

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

ARTICLE V: Effective date, if other than the date of filing:

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

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(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.)

DIANA LEE NEFF

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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(OPTIONAL)