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(F	Requestor's Name)				
(A	Address)				
(Address)					
(C	Dity/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
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DIVISION OF CORPORATION OF SECRETARY OF SEPONATION OF 2: 33

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	RCT: Marda French Interiors, L.L.C.	
0000	(Name of Limited Liability Company)	
The e	closed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Marda French	
	(Name of Person)	
	Marda French Interiors, L.L.C.	
	(Firm/Company)	
	3167 Ashford Square	
	(Address)	01 101 101 101 101 101 101 101 101 101
	Vero Beach, FL 32966	SEP
	(City/State and Zip Code)	
For fu	ther information concerning this matter, please call:	DIVISION OF CORPORATIONS
Mar		2: 33
	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclo	sed is a check for the following amount:	
] \$ 125	00 Filing Fee \$\sum \$\sum \text{\$\sum \text{\$\sin \text{\$\sum \text{\$\sin \text{\$\sum \text{\$\sin \sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \sin \text{\$\sin	s &
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Marda French Interiors, L.L.C.			
(Must end with the words "Limited Liabi	ility Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Co	ompan	y is:
Principal Office Address:	Mailing Address:	•	
3167 Ashford Square	3167 Ashford Square		
Vero Beach, FL 32966	Vero Beach, FL 32966	_	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the 1	stered Agent. You must designate an individual or anot		SECR GIVISIO
Marda French		- 10	SE E
Name		-	COS RYC
3167 Ashford Squar	re	PM 2:	PORA
Florida street add	dress (P.O. Box NOT acceptable)	: သ	ATE ATE
Vero Beach,	_{FL} 32966	ယ	र्डें
City, State, a	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..

Registered Agent's Signature (REOLIRED)

(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:

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	Marda French	
	3167 Ashford Square	
	Vero Beach, FL 32966	
MGR	Chris French	
	3167 Ashford Square	
	Vero Beach, FL 32966	
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		——写题
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		Program
		P 25
(Use attachment if necessary)		OF STATIONS RPORATIONS PM 2: 33
27		Ū.
CLE V: Effective date, if other than the	e date of filing:	(OPTIONAL)
effective date is listed, the date must l	oe specific and cannot be more than five b	usiness days prior
0 days after the date of filing.)		
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:		
10.2		

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.)

Marda French

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)