08000039456

J. Ware 94156 Chr Fern. Beac	istopher L, FIA 3203	skanë 34
(Cit	ty/State/Zip/Phon	e #)
<u> </u>	₩AIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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03/21/08--01014--024 **160.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Annibelle's Emporium LLC	
(Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	a principal office of the Limited Liability Company is:
The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
94156 Christopher Lane	94156 Christopher Lane
Fernandina Beach, Florida 32034	Fernandina Beach, Florida 32034
	red Office, & Registered Agent's Signature St. egistered Agent. You must designate an individual or another Property of the registered agent are:
The name and the Florida street address of the	ne registered agent are:
Joan Ware	H.S. K.
Na	me OPA
94156 Christophe	r Lane
Florida street	address (P.O. Box <u>NOT</u> acceptable)
Fernandina Beach	, Flogida 32034
City, Sta	te, 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 (REQUIRED)

(CONTINUED)
Page 1 of 2

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Joan Ware
	94156 Christopher Lane
	Fernandina Beach, Florida 32034
MGRM	Barry L. Ware
	94156 Christopher Lane
	Fernandina Beach, Florida 32034
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: . (O
effective date is listed, the date must b	be specific and cannot be more than five busi
0 days after the date of filing.)	
DECHINED CICNATUDE.	
REQUIRED SIGNATURE:	
	M. Wave er or an authorized representative of a member.
	<u>-</u>
(In accordance with se of this document const that the facts stated	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

Joan Ware

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee