(Re	equestor's Name)	
(Ac	ddress)	
· (Ac	ddress)	
, (C)	ty/State/Zip/Phone	- t h
, . (Ci	ty/State/Zip/Priorit	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
·	·	·
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

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SECRETARY OF STATE
DIVISION OF CORPORATION

G. MCLEOD

MAR 2 5 2008

EXAMINER

COVER LETTER

	of Corporations	
SUBJECT:	Willy'S HATS &	CRAFT LLC.
	(Name of Limite	ed Liability Company)
The enclosed Arti	cles of Organization and fee(s) are	submitted for filing.
Please return all c	orrespondence concerning this matt	er to the following:
$\dot{\omega}$	illy E. Ruiz	
		(Name of Person)
		(Firm/Company)
144	3 WEST 44 PLACE	<u>e</u>
	13 WEST 44 PLACE	(Address)
	liALEAH- Florid	//////////////////////////////////////
	(Cit	y/State and Zip Code)
For further inform	nation concerning this matter, please	call:
Wil	ly E. Ruiz	at ('786) 262 - 1456 (Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a che	eck for the following amount:	
∑ \$125.00 Filing	Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy 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 Taliahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The second

ARTICLE I - Name: The name of the Limited Liability Company is	:
(Must end with the words "Limited Liab	RAFT LLC. ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1443 WEST 44 PLACE HINIERH - FLA 33012 ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registeries sentity with an active Florida registration.)	ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
WILLY E, Ruiz Namo	
1443 WEST 44 P.	<u> </u>
	fl. 330/2
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.

Registered Agent's Signature (REQUIRED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	WILLY E. Ruiz 1443 WEST 44 PLACE
MGRM	MARÍA MIRYAM RUIZ
	1443 WEST 44 PLACE HIALEAH- FLA. 33012
wak-nakal-na-na-na-na-na-na-na-na-na-na-na-na-na-	
	<u> </u>
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: MARCH 20-2008. (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.)

Willy E, Ruiz
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)