L08000051550

(Re	equestor's Name)	 ,
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	of Status
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w08-23384

COVER LETTER

TO:	TO: Registration Section Division of Corporations									
SUBJE										
	(Name of Limited Liability Company)									
The enc	losed Articles of Organization and fee(s) are submitted for filing.									
Please n	Please return all correspondence concerning this matter to the following:									
_	Sonia Elizabeth Nunez Molina (Name of Person)									
_	Fashion by Ely, LLC (Firm/Company)									
	(Firm/Company) 1									
_	3069 N.W. 30 ST.									
	()									
_	Miami Florida 33142 (City/State and Zip Code)									
	(City/State and Zip Code)									
For furt	her information concerning this matter, please call:									
Sor	(Name of Person) Name of Person) (Area Code & Daytime Telephone Number)									
Enclos	ed is a check for the following amount:									
⊠ \$125,0	00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\text{S160.00 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									



May 23, 2008

SONIA ELIZABETH NUNEZ MOLINA 2nd ml FASHION BY ELY, LLC 3069 N.W. 30 STREET MIAMI, FL 33142

SUBJECT: FASHION BY ELY, LLC Ref. Number: W08000023384

We have received your document for FASHION BY ELY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

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) 245-6067.

Letter Number: 808A00029858

Neysa Culligan Document Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limit	ed Liability C	Company is:						
Fast	nion b	r El	۲,	LLC				
(Must en	d with the words	"Limited Liabi	lity Compa	ny, "L.L.C.," or "	LLC.")			
ARTICLE II - Addre The mailing address ar		ess of the p	rincipal (office of the I	Limited Lia	bility Com	ipany	is:
Principal Office Add	ress:		<u>Maili</u>	ng Address:				
3069 N.W.			300 M1A	09 N.W MI, FLOR	. 30 S 35 AQL	1 REET 3142		
ARTICLE III - Regis (The Limited Liability Compa business entity with an active The name and the Flor	any cannot serve a e Florida registrat	is its own Registion.)	registere	t. You must desig d agent are:	nate an individ	lual or another SECRE	08 HAY 23	
	3069				 -	OF ST	PM 2: 19	
	MIAM		FL	331 4 2	•	ATE	19	
Having been named a liability company a registered agent and a statutes relating to the accept the obligati	nt the place de agree to act in he proper and	signated in this capacid complete p	this certi ty. I furt erformai	ficate, I hereb her agree to c uce of my dutio	ny accept the comply with es, and I am	e appointm the provisi familiar w	ent as ons of vith an	all

Page 1 of 2

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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member Eli LABETH NUNEZ MOLINA

3069 N.W. 30 STREET MIAMI FLORIDA

(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 afmember 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.)

E112ABETH

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)