

LU9000000574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

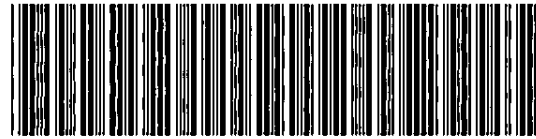
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF
TALLAHASSEE, FLORIDA

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STATE
DIVISION OF
TALLAHASSEE, FLORIDA

B. KOHR

JAN - 6 2009

EXAMINER

CORP DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: RICKY SOTO

DATE: 01/05/2009

REF. #: 001190.97852

CORP. NAME: LAURSHELL, LLC

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TALLAHASSEE, FLORIDA

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 58823 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

OF

LAURSHELL, LLC

ARTICLE I

Name

The name of this limited liability company is **LAURSHELL, LLC** (the "Company").

ARTICLE II

Address

The mailing address and street address of the principal office of the Company is:

837 NW 82nd Place
Boca Raton, Florida 33487

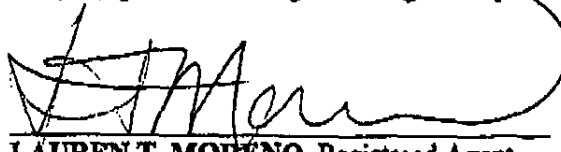
ARTICLE III

Registered Office and Agent

The name and the Florida street address of the registered agent are:

LAUREN T. MORENO
837 NW 82nd Place
Boca Raton, Florida 33487

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 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.


LAUREN T. MORENO, Registered Agent

ARTICLE IV

Managing Members

Title:

Name and Address:

MGRM

LAUREN T. MORENO
837 NW 82nd Place
Boca Raton, Florida 33487

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MGRM

SHELLEY MORENO SOLOMON
3453 DC Palladian Circle
Deerfield Beach, Florida 33442

Dated this 5th day of January, 2009.

A handwritten signature in black ink, appearing to read 'Lauren T. Moreno', written over a horizontal line.

LAUREN T. MORENO, 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.)