209000002243

(Requestor's Name)	
(Address)	600139411526
(Address) (City/State/Zip/Phone #)	109-2243
PICK-UP WAIT MAIL	01/05/0901031021 **
(Business Entity Name)	7/a LC
(Document Number)	aus Est
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	Effective date
	1/2/09
	, ,

Office Use Only

N. CAUSSEAUX

**130.00

JAN 8 2009

EXAMINER

COVER LETTER

TO:	Registration Division of C	Section Corporations		
CLIDA	ECT.	SOUTH SEA	S DEWEL	RY. LLC
SUBJ	EC1:		Liability Company)	
The en	closed Articles	of Organization and fee(s) are su	bmitted for filing.	
Please	return all corre	spondence concerning this matter	to the following:	
		Sean Bloom	field	
		(1)	lame of Person)	
		Bloonfield Pr. 7 Riveredge	oductions	
		1)	Firm/Company)	
	31	7 Riveredge	Blvd	Ste 103
	(Cocoa, FL	32922	
		(City/	State and Zip Code)	
For fur	ther information	n concerning this matter, please of	eall:	
				7150
	Jean	Bloomfield ne of Person)	at () 776 (Area Code & Daytime Te	Johana Number)
	(14an	ic of Forson)	(Area Code & Dayinie 16	repriore Number)
Enclos	sed is a check	for the following amount:		
□ \$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address	Street/Courier Address	<u> </u>
		Registration Section Division of Corporations	Registration Section Division of Corporation	ns
		P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center	Circle
			Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SOUTH SEAS	JEWELRY, LLC
(Must end with the words "Limited Lia	ibility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Bloomfield Productions	Bloomfield Productions 317 Riveredge Blid, Ste 103
317 Riveredge Blud, ste 103 (0000, FL 32922	317 Riveredge Blid, Ste 103 Cocon, FL 32922
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Regulations entity with an active Florida registration.)	
The name and the Florida street address of the	
Senn Bloo	· Mrteld
Nan	
317 Rivera	dge 15/vd, 54 103 € 0
Clarida atract a	address (P.O. Pay NOT accentable)

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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Manag	
MGRM	Sean Bloomfield 317 Riveredge Blod, Ste 103
MGRM	COCOM, FL 32922 ROBERT ENDERS 4439 CHAJTAIN, DRIVE
MGRM	MECROURNE, FL 32940 KELLY BRUMBACH 4439 CHASTAIN DR
MGRM	MELBOURIUE, FL 32940 Lisa Bloomfield 317 Riveredge Blvd, Ste 103
(Use attachment if a	1/2/29
	d, the date must be specific and cannot be more than five business days prior
<u>REQUIRED</u> SIGN	VATURE: SEGRETARY SE
	ignature of a member or an authorized representative of a member.
	In accordance with section 608.408(3), Florida Statutes, the execution f this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
-	Senn Bloomfield 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)