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· (Re	equestor's Name)	
(Δ.	ddress)	
(^.	\. \.	
(Ac	ddress)	
(Ĉi	ty/State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(5)	No	
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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2009 MAR -2 PM 1: 02
SECRETARY OF STATE

C. LEWIS

MAR - 3 2009

EXAMINER

COVER LETTER

	stration Section ion of Corporations				
SUBJECT:	Four Stars Ente	rprises L.L.(C.		
	(N	ame of Limited Li	ability Comp	any)	
The enclosed	Articles of Organization a	und fee(s) are subm	itted for filin	g.	
Please return	all correspondence concer	ning this matter to	the following	g:	
War	da Damico				
		(Nam	e of Person)		
Little	e Paris Cafe, Ba	skets & Gif	ts to Go	, R.D.M.A	
=1 1		(Firm	/Company)	·	
363	1 Silver Bluff Blv	٧d.			
	 	(/	Address)		
Ora	nge Park,Fl. 320)65			
		(City/Stat	e and Zip Code)	
For further inf	formation concerning this	matter, please call:	:		
Wanda [amico	at (904	579-195	5
	(Name of Person)		(Area Cod	e & Daytime Tele	phone Number)
Enclosed is a	check for the following	g amount:			
□\$125.00 Fili	ng Fee ☑\$130.00 Fi Certificate	of Status (155.00 Filin Certified Co additional cop	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Add Registration S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Registrati Division Clifton B 2661 Exc	ourier Address ion Section of Corporations duilding ecutive Center Core, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Liability Company is:
MD HAR -2 P
○ 35
1:02 STATE FLORIDA
's Signature: 2009 HAR -2 PH 1

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Title:	Name and Address:	
"MGR" = Manager		17. C
"MGRM" = Managing Member		
MGR	WANDA DAMICO	: Allanda Co
	3631 SILVER BLUFF BLVD.	99%
	ORANGE PARK,FL. 32065	Q;
		
		· · · · · · · · · · · · · · · · · · ·
		
(Use attachment if necessary)		
I.E.V. Effective date if other than the	e date of filing:	(OPTIONAL)
fective date is listed, the date must	be specific and cannot be more than five	ve business days prior
days after the date of filing.)	•	
REQUIRED SIGNATURE: /	/	
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:	eda (1) anion	
11/20	da Danico	shar
Signature of a mem	da landico ber or an authorized representative of a mem	
Signature of a mem	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of per	on

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)