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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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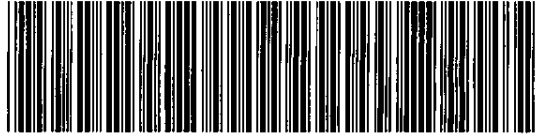
(Business Entity Name)

(Document Number)

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Effective Date 03/02/09

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 MAR - 3 AM 10:54

T. HAMPTON

MAR - 4 2009

EXAMINER

2718-6008

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BEE BO'S GIFT BASKETS L.L.C  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRENDA DWELLEY

(Name of Person)

BEE BO'S GIFT BASKETS

(Firm/Company)

10127 FRANKEL STREET

(Address)

ORLANDO, FLORIDA 32825

(City/State and Zip Code)

For further information concerning this matter, please call:

BRENDA DWELLEY

(Name of Person)

at ( 407 ) 222-0436

(Area Code & Daytime Telephone Number)

Enclosed 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**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

09 MAR -3 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 20, 2009

BRENDA DWELLEY  
10127 FRANKEL ST  
ORLANDO, FL 32825

SUBJECT: BEE BO'S GIFT BASKETS L.L.C.  
Ref. Number: W09000008173

We have received your document for BEE BO'S GIFT BASKETS L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 19, 2009. Please amend your document accordingly.

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 309A00006064

Effective Date

03/02/09

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

**BEE BO'S GIFT BASKETS L.L.C.**

(Must end with the words "Limited Liability 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:

10127 FRANKEL STREET  
ORLANDO, FLORIDA 32825

#### Mailing Address:

10127 FRANKEL STREET  
ORLANDO, FLORIDA 32825

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

**RON MARTIN**

Name

**10127 FRANKEL STREET**

Florida street address (P.O. Box NOT acceptable)

**ORLANDO, FL 32825**

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..*

*Ronald Martin*

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

MGR

**Name and Address:**

Brenda Dwelley  
10127 Frankel St  
Orlando FL 32825

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 3-2-2009 bmd (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:**

Brenda M Dwelley  
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.)

**BRENDA DWELLEY**

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)**

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DIVISION OF CORPORATIONS  
09 MAR -3 AM 10:54