(Re	equestor's Name)			
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D. BRUCE

JUN 0 2 2009

**EXAMINER** 

# **COVER LETTER**

TO: Registration S  Division of Co			
SUBJECT: T	M Inspirations Name of Limi	d Loan Apparel and ted Liability Company	More, LLC
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
lia	na C McGla	Name of Person	
		Firm/Company	
207	3-B Watson	Linu	
		Address	
Talla	hassee Flori	da 32308	
1	hassee, Flori e_maca@ho	ty/State and Zip Code	<del></del> 1
<u> </u>	E-mail address: to be used	for future annual report notification)	<u> </u>
For further information	concerning this matter, pleas		JUN-2 AHASS
Tiana Mcc	alackton of Person	at ( <u>\$50</u> ) <u>877 - 6</u> Area Code & Daytime Telep	0 <u>60 ff =</u> f
Enclosed is a check for	or the following amount:		25 ORID
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	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 C Tallahassee, FL 32301	•

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
I AM Inspirational Logo A (Must end with the words "Limited Liability	pparel and More LLC y company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Jallahassee, FL 32308	2073B Watson Luay Tallahassea, FC 32308
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration.	red Agent. You must designate an individual or another
Tiana C. McGlo Name	ockton SSEE 7 17
Florida street address (P.O.)	

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)

City, State, and Zip

(CONTINUED)

## Page 1 of 2

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

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

<u>Title:</u> "MGR" = Mana "MGRM" = Ma	ger naging Member	Name and Address:			•
MGRM		Tiana C. McGlockton 2073 B Watson Way Tallohassee, FL 32308			
	<del></del>				
(Use attachment	•				
ARTICLE V: Effective (If an effective date is li to or 90 days after the d	sted, the date must be sp	te of filing: $\frac{N/A}{A}$ . (Coecific and cannot be more than five bus	)PTION. iness da	AL) ıys pr	ior
<u>REQUIRED</u> SI	J-McH	r an authorized representative of a member.	SECRAJÁIO ALLAHASSI	09 JUN -2	(Income
	of this document constitut that the facts stated herein	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury are true.)  Mc Glockton or printed name of signee	EE.FLORIDA	PM 3: 25	
DW D	. , pea	L	_		

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)