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SECRETARY OF STATE
ALLAHASSEE, FI TABLE

## **COVER LETTER**

10:	Division of Corporations		
SUBJE	ECT: Fleur Jolie Ev Name of Limit	ent Designs	L. L. C.
	Name of Limit	ted Liability Company	
The en	closed Articles of Organization and fee(s) are	submitted for filing.	
Please	return all correspondence concerning this mat	tter to the following:	
	Natalie Caroline	Wood	-1. 2
		Name of Person	2009 JUL 17 SECRETARY
			HAR
		Firm/Company	HASS ABS
	422 Flemming	St,	L 17 PM 1: 32 LTARY OF STATE HASSEE, FLORID
			REAL 3
	Key West, FLA. 3: Cir natalie @ Flevrioliedesi E-mail address: (to be used	2040	<b>P</b>
	(C) (VES 1 , 1 L/11 ) Cit	ty/State and Zip Code	
	natalie @ Flerrioliedes	ghs.com	
-	E-mail address: (to be used	for future annual report notification)	
For fur	ther information concerning this matter, pleas	e call:	
/	Natalie Wood  Name of Person	at ( <u>305</u> ) <u>849 - 7</u> Area Code & Daytime Teleph	557 one Number
	ed is a check for the following amount:		
<b>⊠</b> \$125.0	00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}	Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallabasses, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building	cle

Tallahassee, FL 32301

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

The name of the Limited Liability Compa	any is:	
Fleur Jolie Event [	esigns L.L.C.	
(Must end with the words "Limite	ed Liability Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of  Principal Office Address:	the principal office of the Limited Amailing Address:	Filit Company i
Fleur Jolie Event Designs 422 Flemming St. Key West, FLA 33040	Fleur Jolie Fuent DE	Hans III
Key West, FLA 33040	422 Flemming St. Key West, FLA, 330	
ARTICLE III - Registered Agent, Regis		

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

business entity with an active Florida registration.)

Mary Spear
/ Name
2523 Seidenberg Ave
Florida street address (P.O. Box NOT acceptable)
Key West FL 33040
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..

Registered Agent's Signature (REQUIRED)

### 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" = Manager "MGRM" = Managing Men	Name and Address:
MGR	Natalie Wood  422 Flemming St  Key West, FLA. 33040
. 50	
	SE S
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(Use attachment if necessar	y) DA 2
CLE V: Effective date, if other offective date is listed, the date of days after the date of filing REQUIRED SIGNATURE	er than the date of filing: (OPTION te must be specific and cannot be more than five business deg.)  E:  Lucy Series Ser
CLE V: Effective date, if other offective date is listed, the date of days after the date of filing REQUIRED SIGNATURE Signature of the date of the da	er than the date of filing:
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\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)