# 169 0000 18841

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
<u>:</u>
(Business Entity Name)
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(Document Number)
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EXAMINER



# FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2009

PAUL FLANAGAN 2320 COUNTRY CLUB BLVD. CAPE CORAL, FL 33990

SUBJECT: BLING BLING ECIGARETTES LLC

Ref. Number: W09000035766

We have received your document for BLING BLING ECIGARETTES LLC and your check(s) totaling \$130.00. 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 August 4, 2009. Please amend your document accordingly.

Please return 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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 509A00026949

### **COVER LETTER**

TO:

**Registration Section** 

Division of C	Corporations						
SUBJECT:	Bling Bli	ng EC	igaret	tes L.L.	C		
	Name of Limit	ed Liabil	ity Comp	any			
The enclosed Articles	of Organization and fee(s) are	submitte	d for filin	g.			
Please return all corre	spondence concerning this mat	ter to the	following	g:			
	F	aul Fla					<del></del>
		Name of	Person				
	Bling Blir		<del> </del>	s L.L.C.			
		Firm/Co	mpany				
	2320	Country	y Club I	Blvd		Es	290
		Addı	ress			1. C.	2
	Cape (	Coral F	lorida 3	33990		ASS	7009 AUG 1 4
	Cit	ty/State an	d Zip Cod	le		Fo	≥
<u> </u>	blingblinge E-mail address: (to be used	ecigare	ttes@g	mail.com	1	- Tu	<del>-</del> 5-
For further information	e-mail address: (to be used to concerning this matter, please		annuai rep	ort notificatio	· ·	PACE OF THE PACE O	AM 10: 08
Vida	ılina Rohlfing	at (	239	)	245-3721		
Nan	ne of Person		Area Cod	e & Daytime	Telephone Numb	er	
Enclosed is a check	for the following amount:						
\$125.00 Filing Fee	Certificate of Status	Cer	tified Co	ng Fee & opy oy is enclosed	\$160.00 l Certifica Certified (additional	te of Sta Copy	tus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registrat Division Clifton I 2661 Ex	courier Addition Section of Corporate Building secutive Centers, FL 323	tions ter Circle		

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

ARTICLE I - Name:	
The name of the Limited Liability Company is	is:
Bling Bling ECi	garettes LLC ability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address:	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2320 Country Club Blvd Cape Coral Florida 33990	PO BOX 153042 Cape Coral Florida 33915
business entity with an active Florida registration.)  The name and the Florida street address of the	gistered Agent. You must designate an individual or another e registered agent are:
Nan Nan	
	try Club Blvd .O. Box <u>NOT</u> acceptable)
Cape Coral 33990	<del></del>
City, State	FL e, and Zip
liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S

(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:

REQUIRED SIGNATURE:  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.)  Paul Flanagan  Typed or printed name of signee	Title:	Name and Address:	
Paul Flanagan   2320 Country CLub Blvd   Cape Coral Florida 33990	——————————————————————————————————————		
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:	Monday Managing Member		
Cape Coral Florida 33990  (Use attachment if necessary)  (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:  (OPTIONAL)  effective date is listed, the date must be specific and cannot be more than five business flays priod days after the date of filing.)  REOUIRED SIGNATURE:  (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.)  Paul Flanagan  Typed or printed name of signee	MGR	Paul Flanagan	
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:  Optional  Optiona			
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be more than five business days priod days after the date of filing.)  REQUIRED SIGNATURE:  (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.)  Paul Flanagan  Typed or printed name of signee		Cape Coral Florida 33990	
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Typed or printed name of signee	of this document constit	utes an affirmation under the penalties of perjury	
	Type Filing Fees:	ed or printed name of signee	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)