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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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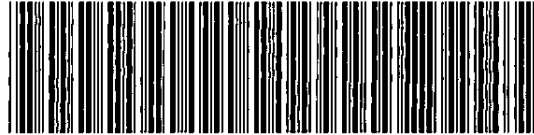
Certificates of Status _____

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Office Use Only

EFFECTIVE DATE

8-15-09



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09 AUG 14 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

AUG 17 2009

EXAMINER

Transmittal Letter

To: Registration Section
Division of Corporations

SUBJECT: PERFECT PLANTS INTERIORSCAPE, LLC

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

Please return all correspondence concerning this matter to the following:

Ron Mulchi, Attorney at Law
201 South Orange Avenue, Suite 910
Orlando, FL 32801-3420

For further information concerning this matter, please call:

Ron Mulchi

407 843 8909

Enclosed is a check for \$125.00

MAILING ADDRESS:
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314
850 245 6051

STREET ADDRESS
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
850 245 6051

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR A
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE 1 – Name

The name of the Limited Liability Company is:

PERFECT PLANTS INTERIORSCAPE, LLC

ARTICLE 2 – Address

The mailing address and street address of the principal office of the Limited Liability Company are:

Principal Office Address

Mailing Address

41250 Thomas Boat Landing Rd
Umatilla, FL 32784

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Umatilla, FL 32784

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TALLAHASSEE, FLORIDA

ARTICLE 3 – Registered Agent, Registered Office, & Registered Agent's Signature

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

Ron Mulchi, Attorney at Law
201 South Orange Ave, Suite 910
Orlando, FL 32801-3420

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, Florida Statutes.



EFFECTIVE DATE 8-15-09

ARTICLE 4 – Managing Member

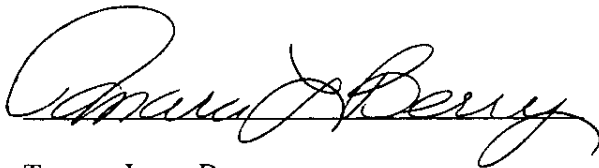
The name and address of the Managing Member are as follows:

Title	Name and Address
Managing Member	Tamara Lynn Berry 41250 Thomas Boat Landing Rd Umatilla, FL 32784

ARTICLE 5 – Effective date

The effective date shall be August 15, 2009.

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.



Tamara Lynn Berry

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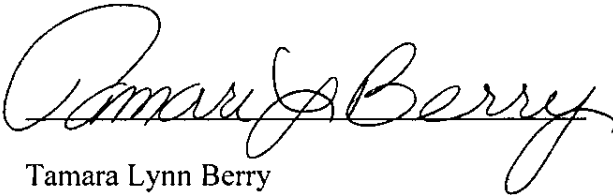
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