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2009 AUG 24 PM 1: 42
SECRETARY OF STATE

T. CLINE
AUG 2 5 2009
EXAMINER

COVER LETTER

TO:

Registration Section

Division of Co	orporations			
SUBJECT:	Fra	nces House, LLC		
SOURCE.		ed Liability Company		
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
 	Jo	oyce Procacci		<u> </u>
		Name of Person		
<u></u>	Fran	nces House, LLC		
		Firm/Company		
	3582	Lakeview Drive		
		Address		
	Delra	y Beach, FL 33445		至
<u></u>		y/State and Zip Code		- F
	JP	1LLH@aol.com		17.1A 22
		for future annual report notific	ation)	23.50 A. 60
For further information	concerning this matter, please	e call:		ES E
	ce Procacci	_at (561)	306-1002 me Telephone Numb	AUG 24 PM 1: 42 SRETARY OF STATE AHASSEE, FLORIDA
Name	of reison	Area Code & Daytii	me reiebtione iampo	G r
Enclosed is a check f	or the following amount:			
∑ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificates (Sed) Certified	Filing Fee, te of Status & Copy copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier A Registration Section Division of Corpo	on	
	Tallahassee, FL 32314	Clifton Building 2661 Executive C	Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limit	ed Liability Company is	::		
(Must en	Frances Hou	ISE, LLC ility Company," "L.L.C.," or "LLC.")		
ARTICLE II - Addre	ss:			
The mailing address ar	nd street address of the p	principal office of the Limited L	iability Company is:	
Principal Office Add	ress:	Mailing Address:		
		Frances House, LLC		
3582 Lakeview Drive		3582 Lakeview Drive,		
Delray Beach, FL 33	445	Delray Beach, FL 33445		
business entity with an active The name and the Flor	ida street address of the Joyce P Name	rocacci	DID AUG 24 F	
	05001 -1	dana Daha	HO PA	į
-	3582 Lake		1: 42 STATE LEGRID	
	•			
_	Delray Beach City, State,	FL 33445 and Zip		
liability company a registered agent and a statutes relating to th	is registered agent and to it the place designated in igree to act in this capac he proper and complete p	o accept service of process for the this certificate, I hereby accept i ity. I further agree to comply wit performance of my duties, and I a gistered agent as provided for in	the appointment as th the provisions of all am familiar with and	
	90~	•		
	Registered Agent's Sign	ature (REQUIRED)		

(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:

"MGR" = Manager "MGRM" = Managing Member MGR Joyce Procacci 3582 Lakeview Drive Delray Beach, FL 33445 [Use attachment if necessary) LE V: Effective date, if other than the date of filing: August 26, 2009 (OPTIONA Rective date is listed, the date must be specific and cannot be more than five business day days after the date of filing.) REQUIRED SIGNATURE: Signature of a number or an authorized representative of a member of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Joyce Procacci Typed or printed name of signee Filing Fees:	11) (CD ! -) (Name and Address:	
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of Registered Agent
\$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)