509226

(Requestor's Name)
(Address)
•
(Address)
(1881-555)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2001,107,111,100)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only

G. MCLEOD

.SEP **24** 2009

EXAMINER



200160909282

09/23/09--01011--017 **125.00

COVER LETTER

TO:		ation Section of Corporations
	·,	SKY CREATIONS, LLC
SUBJE	CT:	Name of Limited Liability Company
The enc	closed Arti	icles of Organization and fee(s) are submitted for filing.
Please r	eturn all c	correspondence concerning this matter to the following:
		Louis Sanchez
_		Name of Person
		SKY CREATIONS, LLC
-		Firm/Company
		372 PERCH lame
-		Address
		SEBASTIAN, FL 32958
-		City/State and Zip Code
_		Lovieshead 20 Yahou. COM
		E-mail address: (to be used for future annual report notification)
For furt	her inform	nation concerning this matter, please call:
L	-00is	Sanchez at (772) 321 - 8486 Name of Person Area Code & Daytime Telephone Number
		Name of Person Area Code & Daytime Telephone Number
Enclose	ed is a ch	eck for the following amount:
]\$ 125.0	00 Filing	Fee \$\int_\$\$130.00 Filing Fee & \$\int_\$\$\$155.00 Filing Fee & \$\int_\$\$\$\$\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AK	HC.	LE	1	-	N	a	m	e
T1			c	41.	_	ī	:	

The name of the Limited Liability Company is:

SKY Creations, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

	Mailing	Address:
--	----------------	----------

372 PERch 32958

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Name

312 PERCH Lame

Florida street address (P.O. Box NOT acceptable)

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..

(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" = Mana		Name and Address:
"MGRM" = Mai		
	naging Member	
MGR		Louis Sanchez
		372 PERCH Lane
		SEBASTIAN, FL 32958
· · · · · · · · · · · · · · · · · · ·		
	_	
		4 44.44
		
(Use attachment	if necessary)	
	•	ate of filing: (OPTION
	date, if other than the da	ate of filing: (OPTION
LE V: Effective	date, if other than the dated, the date must be s	ate of filing: (OPTION specific and cannot be more than five business d
LE V: Effective fective date is lis days after the d	date, if other than the dated, the date must be sate of filing.)	
LE V: Effective fective date is lis days after the d	date, if other than the dasted, the date must be state of filing.) GNATURE:	
LE V: Effective fective date is lis days after the d	date, if other than the dasted, the date must be state of filing.) GNATURE:	
LE V: Effective fective date is lis days after the d	date, if other than the dated, the date must be state of filing.) GNATURE: Signature of a member of the date of the date is stated in the date in the date is stated in the date in the	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury
LE V: Effective fective date is lis	date, if other than the dated, the date must be state of filing.) GNATURE: Signature of a member of this document constitution that the facts stated herei	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury

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

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)