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(Requestor's Name)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
L. SELLERS					
FEB - 9 2010					
EXAMINER					
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# **COVER LETTER**

	ivision of Corporations
SUBJECT	Artful Attorney, LLC
SCHOLC	Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	Jowita Wysocka
	Name of Person
	Firm/Company
	P.O. Box 2091
	Address
<del></del>	St. Petersburg, FL 33731  City/State and Zip Code
	j@artfulattorney.com
For further	E-mail address: (to be used for future annual report notification) information concerning this matter, please call:
TOT TUTULO	internation concerning and matter, prease can.
	Jowita Wysocka at (727) 823-5809  Name of Person Area Code & Daytime Telephone Number
Enclosed	is a check for the following amount:
<b>∑\$</b> 125.00	Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) \$\bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

·	npany is:
	Attorney, LLC
(Must end with the words "Lin	nited 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:
1424 First Street N	P.O. Box 2091
St. Petersburg, FL 33704	St. Petersburg, FL 33731
St. Petersburg, FL 33704  ARTICLE III - Registered Agent, Re	St. Petersburg, FL 33731  egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
St. Petersburg, FL 33704  ARTICLE III - Registered Agent, Re(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address.	St. Petersburg, FL 33731  egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
St. Petersburg, FL 33704  ARTICLE III - Registered Agent, Re(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address.	St. Petersburg, FL 33731  egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:
St. Petersburg, FL 33704  ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address.	St. Petersburg, FL 33731  egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: owita Wysocka
St. Petersburg, FL 33704  ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address:  Journal of the Florida street address:	St. Petersburg, FL 33731  egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: owita Wysocka Name
St. Petersburg, FL 33704  ARTICLE III - Registered Agent, Re(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address.  Journal of the Florida street address.	St. Petersburg, FL 33731  egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: owita Wysocka Name  24 First Street N  dress (P.O. Box NOT acceptable)

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)

(CONTINUED)

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SECRETARY OF STATE

# 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	Name and Address:			
"MGRM" = Managing Member  MGR	Jowita Wysocka P.O. Box 2091 St. Petersburg, Fl. 33704	<b>7</b>	- -	
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(Use attachment if necessary)  TICLE V: Effective date, if other than the data effective date is listed, the date must be s				
or 90 days after the date of filing.)  REQUIRED SIGNATURE:	The stand cannot be more than five by	18111628	days p	111
Signature of a momber of	or an authorized representative of a member.			
(In accordance with section	on 608.408(3), Florida Statutes, the execution ates an affirmation under the penalties of perjury			
	Jowita Wysocka			
Type: Filing Fees:	d or printed name of signee	TAS:	=	
\$125.00 Filing Fee for Articles of Organiz	zation and Designation	ECRE	333 (	-

of Registered Agent

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