## 11000053966

(Requestor's Name)
(Address)
(A.H)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Durings Friils Norma)
(Business Entity Name)
(Document Number)
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DIVISION OF CORPORATIONS

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## COVER LETTER

Division of C			
suвлест: <u>Редду</u>	's Pendants		
		ted Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
Mark Avery			
		Name of Person	
Peggy's Pe	ndants		
		Firm/Company	
2875 S. Ora	ange Ave. 500-2320		
		Address	
Orlando, FL			
	Cl	ty/State and Zip Code	
<del></del>	E-mail address: (to be used	for future annual report notification)	
For further information	concerning this matter, pleas	e call:	
Mark Avery		_at ()	
	of Person	at ()Area Code & Daytime Telep	hone Number
Enclosed is a check f	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$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 Ci Tallahassee, FL 32301	rcle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	E 1	- N	ame:
The name	of	the	Limite

ed Liability Company is:

Peggy's Pendants LLC.

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

## **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:	10 7
2875 S. Orange Ave.	2875 S. Orange Ave.	Ř
500-2320	500-2320	
Orlando, FL. 32806	Orlando, FL. 32806	
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another	PN 2։ կե

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

Mark Avery		
	Name	
2875 S. Ora	inge Ave. 500-2320	
	lorida street address (P.O. Box	x <u>NOT</u> acceptable)
Orlando,	FL	32806
	City, State, and Zip	

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..

M. Short Registered Agent's Signature (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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Mark Avery 2875 S. Orange Ave. 500-2320 Orlando. FL. 32806
<del></del>	
	he date of filing: 05/10/2010 (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a mem	ber or an authorized representative of a member.
(In accordance with of this document corthat the facts stated)	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)
Mark Avery	Typed or printed name of signee
<u>Filing Fees:</u>	- -
\$175.00 Filing Fac for Articles of the	conjection and Declaration

iling Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)