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(City/State/Zip/Phone #)
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EXAMINER



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SEGRETARY OF STATE
AND AHASSEE, FLORIDA

COVER LETTER

TO: Registration Section

Division of Corporations					
SUBJECT: Joy Joy	Sweets IIC				
SUBJECT: Joy Joy		ed Liability Company			
The enclosed Articles of	f Organization and fee(s) are	submitted for filing			
The enclosed Afficies of	organization and reces) are	submitted for ming.			
Please return all corresp	ondence concerning this mat	ter to the following:			
Joy Andersen	Bowes	·			
		Name of Person			
Joy Joy Swee	ets, LLC				
		Firm/Company			
12108 Dyson	Court				
		Address			
Orlando, Flori		-/C			
		y/State and Zip Code			
tapbird66@hc		for future annual report notification)			
For further information	concerning this matter, please	-			
roi furmei miompation	concerning this matter, please	s can.			
Joy Andersen Bowe	es	at (407) 963-0996			
Name of Person		Area Code & Daytime Teleph	one Number		
Paralaced in a short Co	and a Caller Consequence				
Enclosed is a check to	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 Cir	rcle		

OR FLORIDA LIMITED LIABILITY COMPANY
ny is:
d Liability Company, "L.L.C.," or "LLC.")
the principal office of the Limited Liability Company is:
Mailing Address:
12108 Dyson Court
Orlando, Florida 32821
stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another f the registered agent are: Name reet address (P.O. Box NOT acceptable)
FL 32821 City, State, and Zip
nd to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, ES Signature (REQUIRED)

ž

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manag		Name and Address:	
"MGRM" ≈ Mar MGR	aging Member	In Andrews Davin	
WGK		Joy Andersen Bowes	
		12108 Dyson Court Orlando, Florida 32821	_
		Grando, Horna GEO21	
			
			_
			-,-
			_
			_
	TTD-TELLO		_
			_
(Use attachment	if necessary)		
CLE V: Effective	date, if other than the da	ate of filing: (OPTIC	ONA
a CC and have all a dar for 11 a	sted, the date must be s	pecific and cannot be more than five business	محمدات م
	ata of filing \	P	s uay:
	ate of filing.)		s uay:
effective date is lis 00 days after the da <u>REQUIRED</u> SI	C,		s uay:
0 days after the d	C,	ndersex Loves	s uay:
0 days after the d	GNATURE:	ndu See For Sul Sor an authorized representative of a member.	s uay:
0 days after the d	GNATURE: Signature of a member of the contraction with section	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution the an affirmation under the penalties of perjury	s uay:
00 days after the da	GNATURE: Signature of a member of this document constitute.	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution the an affirmation under the penalties of perjury	s uay:

Filing Fees:

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

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