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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #) ·
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	UNT
	SEP	2 7 2010
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Office Use Only

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SECRITARY OF STATE

COVER LETTER

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ŢŎ:	Registration Division of C				
SUBJ	ECT: THE GO	ODDESS WITHIN	11:12: 0		
		Name of Limit	ted Liability Company		
The er	nclosed Articles	of Organization and fee(s) are	submitted for filing.		
Please	return all corres	pondence concerning this mat	ter to the following:	TALLA	2010 SEP
	Laura L. Pun	<i>i</i> s		立で: 35.57	-0
			Name of Person	3388 50 X 81	24 PM
	THE GODDE	SS WITHIN		<u> </u>	
			Firm/Company	SE SE	
	12505 MCC5	2ECOD BLVD # 102		™	65
	12505 IVICGE	REGOR BLVD, # 102	Address		—
			, tud. 655		
	FORT MYER	S, FLORIDA 33919			
		Cit	y/State and Zip Code		
	lpflipper@aol	.com			
	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COL	E-mail address: (to be used	for future annual report notification)		
For fu	ther information	concerning this matter, please	e call:		
Laura	L. Purvis		at (_239)245-4878		
		of Person	Area Code & Daytime Telephone Numbe		
Enclo	sed is a check f	or the following amount:			
☑\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	e of Status	s &
		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 FLO	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	S.
The name of the Limited Liability Company is:	A LIMITED LIABILITY CONTAINS SEP 24
THE GODDESS WITHIN, LLC	Ro Z
THE GODDESS WITHIN, LLC (Must end with the words "Limited Liability)	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	y Company, "L.L.C.," or "LLC.") ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12505 McGregor Blvd. # 102	12505 McGregor Blvd. # 102
Fort Myers, FL 33919	Fort Myers, FL 33919
The name and the Florida street address of the re	gistered agent are:
Name	
12505 McGregor Blvd. # 1	02
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)
Fort Myers	_{FL} 33919
City, Stat	te, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered 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" = Manager	Name and Address:
"MGRM" = Managing Member	Laura L. Purvis 12505 McGregor Blvd. #102
MGR	Laura L. Purvis
	12505 McGregor Blvd., # 102
	Fort Myers, FL 33919
	Fort Myers, FL 33919
	<u> </u>
(Use attachment if necessary)	
(Ose attachment is increasing)	
LE V: Effective date, if other than the	e date of filing: (OPTIONAL
	be specific and cannot be more than five business days
	•
ffective date is listed, the date must l days after the date of filing.)	
days after the date of filing.)	
days after the date of filing.)	, ·
days after the date of filing.) REQUIRED SIGNATURE:	2 Puras
days after the date of filing.) REQUIRED SIGNATURE:	ber or an authorized representative of a member.
days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of	ber or an authorized representative of a member.
REQUIRED SIGNATURE: Signature of a member of this document cons	her or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury
days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of	her or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

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)