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(Re	equestor's Name)	
(Ac	Idress)	
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(Ci	ty/State/Zip/Phone	: #)
PICK-UP	, WAIT	MAIL
(Bı	ısiness Entity Nam	ne)
· (Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

EFFECTIVE DATE D2/04//



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SECRETARY OF STATE
FALLAHASSEE, FI ORID.

D. BRUCE FEB 0 9 2011 EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CT: Trotter's Gallery	•
	Name of Limited Liability Company	
	losed Articles of Organization and fee(s) are submitted for filing. eturn all correspondence concerning this matter to the following:	
	Wendy A. Lavanture	
	Name of Person	
	Trotter's Gallery	
	Firm/Company	
	642 107th Avenue North	
	Address	fe's might
1	lapies, FL 34108	11 F
	City/State and Zip Code	
•	Detraxox@aol.com E-mail address: (to be used for future annual report notification)	SEX CO
For fur	her information concerning this matter, please call:	OF STA
Wen	ly A. Lavanture 239 , 571-0175	PAGE 66
	Name of Person Area Code & Daytime Telephone Number	>
Enclo	ed is a check for the following amount:	
\$125.00	Filing Fee \$\int_\$\$130.00 Filing Fee & \$\int_\$\$155.00 Filing Fee & \$\int_\$\$\$160.00 Filing Fee & Certificate of Status Certified Copy Certificate of (additional copy is enclosed)	Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Street/Courier Address Registration Section Division of Corporations Clifton Building	·

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Trotter's Gallery 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:

642 107th Avenue North

Naples, FL 34108

642 107th Avenue North

Naples, FL 34108

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 apother business entity with an active Florida registration.)

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

Wendy A. Lavanture

Name

642 107th Avenue North

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

Naples

_{FL} 34108

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE 02/04/11

• • • •

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGR	Wendy A. Lavanture
	642 107th Avenue North Naples, FL 34108
	Naples, FC 34 106
	· · · · · · · · · · · · · · · · · · ·
effective date is listed, the date r	han the date of filing: February 4, 2011 (OPTIONAL) must be specific and cannot be more than five business days prior
CLE V: Effective date, if other the effective date is listed, the date is	must be specific and cannot be more than five business days prior
CLE V: Effective date, if other the effective date is listed, the date is 00 days after the date of filing.) REQUIRED SIGNATURE:	must be specific and cannot be more than five business days prior
CLE V: Effective date, if other the effective date is listed, the date is look after the date of filling.) REQUIRED SIGNATURE: Signature of a (In accordance with sections an affirmation of a light and aware that any falls.)	must be specific and cannot be more than five business days prior

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)