

L 110000033107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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EXAMINER



700198107647

03/17/11--01010--003 **130.00

EFFECTIVE DATE 3/13/2011

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAR 17 AM 10:57

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Custom Fit Fashions LLC.
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

EFFECTIVE DATE 3/13/2011

Please return all correspondence concerning this matter to the following:

Michelle M. Guay

Name of Person

Custom Fit Fashions LLC.

Firm/Company

3420 27th Ave NE

Address

Naples, FL 34120

City/State and Zip Code

CustomFit.Michelle@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle M. Guay

Name of Person

at (239) 200-3244

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & 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 Circle
Tallahassee, FL 32301

FILED
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EFFECTIVE DATE 3/13/2011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Custom Fit Fashions 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:

Custom Fit Fashions LLC.

3420 27th Ave NE

Naples, FL 34120

Mailing Address:

Custom Fit Fashions LLC.

3420 27th Ave. NE

Naples, FL 34120

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 another business entity with an active Florida registration.)

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

Michelle M. Guay

Name

3420 27th Ave NE

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

Naples

FL

34120

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)

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:

MGRM

Michelle M. Guay

3420 27th Ave. NE

Naples, FL 34120

MGRM

James H. Althouse

9405 Marino Cir. Apt. # 307

Naples, FL 34114

MGRM

Jeanne Roan

3531 5th Ave SW

Naples, FL 34117

MGRM

Mary Ellen West

7935 Preserve Cir #422


Naples, FL 34109

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March 13, 2011. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Michelle M. Guay

Typed or printed name of signee

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)