# 11000042215

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special instructions to Filing Officer:
L. SELLERS
APR -8 2011

**EXAMINER** 

Office Use Only

800196708788

03/11/11--01025--001 \*\*155.00

11 APR -7 PH 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Division of	on Section Corporations		
<sub>SUBJECT:</sub> Eleg	gant Happenings, l	LC.	
		ed Liability Company	
The enclosed Article	es of Organization and fee(s) are	submitted for filing.	
Please return all corr	respondence concerning this mat	ter to the following:	
Joe M.	Chambers		
		Name of Person	
Johnsto	on, Hinesley, Flowe	ers, Clenney & Turner, P.C.	
		Firm/Company	
P.O. Bo	ox 2246		
<del>-, · · · · · · · · · · · · · · · · · · ·</del>		Address	
Dothan, a	Alabama 36302		
<u></u>		ly/State and Zip Code	
<u>j</u> chamber	s@jhfc-law.com		
		for future annual report notification)	
For further informati	ion concerning this matter, pleas	e call:	
Joe M. Chamb	pers	ar ( <b>334</b> ) 793-1115	
Na	me of Person	at (334) 793-1115  Area Code & Daytime Telephone Number	_
Enclosed is a check	k for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Certificate of S (additional copy is enclosed) Certified Copy (additional copy is	Status &
	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	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 14, 2011

JOE M. CHAMBERS JOHNSTON, HINESLEY, FLOWERS, CLENNEY P.O. BOX 2246 DOTHAN, AL 36302

SUBJECT: ELEGANT HAPPENINGS, LLC

Ref. Number: W11000014526

We have received your document for ELEGANT HAPPENINGS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 611A00006205

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

# ARTICLES OF ORGANIZATION OF ELEGANT HAPPENINGS, LLC

#### ARTICLE I - Name:

The name of the limited liability company is **ELEGANT HAPPENINGS**, **LLC** (the "Company").

#### ARTICLE II - Address:

The mailing address of Limited Liability Company and the street address of the principal office of the Limited Liability Company is 4105 Lafayette Street, Marianna, Florida 32446.

#### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent is **Gayle H. Tatum**, 4105 Lafayette Street, Marianna, Florida 32446

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 provided for in Chapter 608 of the Florida Statutes.

Signature of Registered Agent

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

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

Title:	Name and Address:	<del></del>	
"MGR"= Manager "MGRM" = Managing Member		11 APR -7   SECRETARY FALLAHASSE	<u> </u>
Gayle H. Tatum (MGR)	P.O. Box 817 Marianna, Florida 32446	PR -	ED
Barbara A. Payne (MGR)	P.O. Box 292 Graceville, Florida 32440	TATE ORIDA	

### **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.)

**Gayle H. Tatum Typed or Printed Name of signee**