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C. LEWIS

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EXAMINER

COVER LETTER

	TO:	Registration of	n Section Corporations			
44-	em m	ст. Fred	quent Inspirations L	LLC		
	SUBJE	CI: <u>- 1 - 1 - 1</u>		led Liability Company		
	The enclosed Articles of Organization and fee(s) are submitted for filing.					
	Please r	eturn all corr	espondence concerning this mat	ter to the following:		
	(Catheri	ne D. Fox			
	_	<u> </u>		Name of Person		
		Freque	nt Inspirations LLC			
	-			Firm/Company		
		2626 N	obility Ave			
	-			Address		
	N	/elboum	ne FL 32934			
	13	neibouri		ty/State and Zip Code		
	i	lfox@bell	south.net			
E-mail address: (to be used for future annual report notification)						
	For furt	ner informati	on concerning this matter, please	e call:		
	Cathe	erine D. F	ox	at (321) 427-9503		
		Naı	ne of Person	at (321) 427-9503 Area Code & Daytime Telephone Number		
	Enclose	ed is a check	for the following amount:			
V			\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fe Certified Copy (additional copy is enclosed) \$160.00 Filing Fe Certificate of Statu Certified Copy (additional copy is enclosed)	ıs &	
			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 FLORIDA LIMITED LIABILITY COMPANY

requen	t Inspirations LLC (Must end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")	
A DODLOU D AT			
ARTICLE II The mailing a		f the principal office of the Limited Lia	ability Company is:
Principal Of	fice Address:	Mailing Address:	
2626 Nobility	Ave	2626 Nobility Ave	
Melbourne, Fl		Melbourne, FL 32934	
business entity w	ility Company cannot serve as its ow vith an active Florida registration.) I the Florida street address o	on Registered Agent. You must designate an individual of the registered agent are:	2011 SEC 1AEE
	Catherine D. Fox	<u></u>	AFR I
		Name	EJARY.C
	2626 Nobility	Name Ave	RR 13 RMI
	2626 Nobility Florida st	Name AVE treet address (P.O. Box <u>NOT</u> acceptable)	13 PH BARY. OF STA
	2626 Nobility Florida st Melbourne	Name Ave	HS PM ARYLOFS SSEE-FI

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

FILED ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: 2011 ARR 1-3 PM IRE 86 Name and Address: Title: "MGR" = Manager SECRETARY OF STATE TABLE HASSEE FLORIDA "MGRM" = Managing Member **MGR** Catherine D. Fox 2626 Nobility Ave Melbourne, FL 32934 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 04/11/2011 . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

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.)

Catherine D. Fox

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)

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