

111000048470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

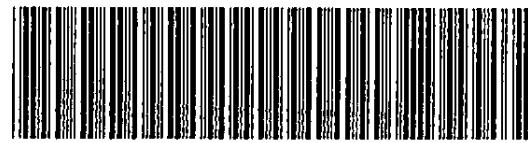
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Effective Date 04/18/11

04/22/11--01028--022 \*\*155.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

J. BRYAN  
APR 25 2011  
EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Sistahlove Jewels LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Sandra D. Mink

Name of Person

Sistahlove Jewels

Firm/Company

13301 Corbel Circle unit 2134

Address

Fort Myers, Florida 33907

City/State and Zip Code

sistahlove@comcast.net

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

For further information concerning this matter, please call:

Sandra D. Mink

Name of Person

at 239 245-8361

Area Code & Daytime Telephone Number

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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

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

**The name of the Limited Liability Company is:**

## Sistahlove Jewels 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:**

13301 Corbel Circle unit 2134  
Fort Myers, Florida  
33907

13301 Corbel Circle unit 2134  
Fort Myers, Florida  
33907

**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.)

Effective Date 04/18/11

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

Sandra D. Mink

Name \_\_\_\_\_

13301 Corbel Circle unit 2134

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

Fort Myers, FL 33907

**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.*

Sandra L. Mink  
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:**

MGR

Sandra D. Mink

13301 Corbel Circle unit 2134

Fort Myers, FL 33907

MGRM

Yvette Rue-Griffin

82 Rhodes Ave.

Ewing, New Jersey 08638

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: 4-18-2011. (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:**

Sandra Mink  
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.)

Sandra Mink

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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