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(Requestor's	Name)
(Address)	
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2011 MAY -6 MM 11: 20
ALLAHASSEF FILME

J. SAULSBERRY EXAMINER

MAY 1 0 2011

Re: Linen White Ocean Blue LLC

Dear Sir or Ma'am,

Enclosed is a check for \$160.00 along with our Articles of Organization and Designation of Registered Agent. We are also requesting a certified copy of the Articles of Organization and a Certificate of Status. It is my understanding that a letter of acknowledgment will also be issued to us free of charge upon registration. Please contact me if you need any further information. I look forward to heating from you soon.

Best Regards

(305) 467-4064

beachfront blue@aol.com

SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Linen White Ocean Bl	ue LLC.	
ococci.	ited Liability Company	7A:33
		ECC H
The enclosed Articles of Organization and fee(s) are	e submitted for filing.	题:
Please return all correspondence concerning this ma	atter to the following:	SSEE SSEE
Mayda Sued		2011 HAY -6 AM 11:20 SECRETARY OF STATE TALL AHASSEE FLORID
Mayaa Oaoa	Name of Person	20
	Firm/Company	· · · · · · · · · · · · · · · · · · ·
11201 SW 55th Street, Bo	x 120	₹ ⁴⁴ *3# F
	Address	,
Miramar, FI 33161		
	ity/State and Zip Code	 – -
beachfrontblue@aol.com		, :
E-mail address: (to be used	for future annual report notification)	<u> </u>
For further information concerning this matter, please	se call:	₹# 1
Mayda Sued	at (786) 985-5430	
Name of Person	Area Code & Daytime Telepho	ne Number
Enclosed is a check for the following amount:		
		1 (0 00 PW - F
\$125.00 Filing Fee \$\(\sum \)\$130.00 Filing Fee \$\(\cent{Certificate of Status} \)		160.00 Filing Fee, Certificate of Status &
	(additional copy is enclosed)	Certified Copy additional copy is enclosed)
BE ULL AND	Street/C	
<u>Mailing Address</u> Registration Section	Street/Courier Address Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee FL 32314	Clifton Building 2661 Executive Center Circ	le

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is	:	\$ 25	20
		SEC.	
Linen White Ocean Blue LLC	•	A.C.	2011 157
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	SSI R	- F
ARTICLE II - Address:		<u> </u>	₹
The mailing address and street address of the p	principal office of the Limited I	ري آي Verwilliam (ompany is:
The maning address and street address of the p	in the par office of the Elimited 1	32	
Principal Office Address:	Mailing Address:	9	0
11201 SW 55th Street	11201 SW 55th Street		
Box 120	Box 120		
Miramar, Fl 33161	Miramar, FI 33161		
The name and the Florida street address of the Damayanti Zavala			
4371 SW 160 Av			1
	idress (P.O. Box NOT acceptable)		1
Miramar	· · · · · · · · · · · · · · · · · · ·		
<u> </u>	FL 33027 tate, and Zip		
City, 3	tate, and Zip		
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capaci.	this certificate, I hereby accept	the appoint	ment as
statutes relating to the proper and complete p	• • •	•	•
accept the obligations of my position as reg			
		•	
Druguant /	Lawala		
Registered Agent's Signa	dure (REQUIRED)		

(CONTINUED)

<u>Title:</u>	Name and Address:	TAHAS.
"MGR" = Manager "MGRM" = Managing Member		SEE FLORID
Widnesday Wallaging Welliber		FLE
MGRM	Mayda Sued	
	11201 SW 55th Street, Box 120 Miramar, FI 33161	
	Will affial, F1 33 101	
MGRM	Damayanti Zavala	
	4371 SW 160 Avenue, Apt 202	
	Miramar, FI 33027	
		
		, "2

		; ;—
		— i—
•	he date of filing:	(OPTION
LE V: Effective date, if other than t fective date is listed, the date must	he date of filing:tbe specific and cannot be more than five	
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:		ve business da
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a mention of the firm of the firm at the constitutes an affirmation under the constitutes and affirmation under the false information of the firm at the false information of the	be specific and cannot be more than five	nber. s document herein are true.
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a mention of the constitutes an affirmation unline amayer that any false information.	be specific and cannot be more than five the penalties of perjury that the facts stated hormation submitted in a document to the Department only as provided for in s.817.155, F.S.)	nber. s document herein are true.
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a ment of the first days after the date of filing.) In accordance with section to constitutes an affirmation under the first day false information to constitutes a third degree fellommayanti Z	be specific and cannot be more than five the penalties of perjury that the facts stated hormation submitted in a document to the Department only as provided for in s.817.155, F.S.)	nber. s document herein are true.
REQUIRED SIGNATURE: Signature of a men (In accordance with section constitutes an affirmation un I am aware that any false inf constitutes a third degree felloamayanti Z	ber or an authorized representative of a men 108.408(3), Florida Statutes, the execution of this tider the penalties of perjury that the facts stated had commation submitted in a document to the Department on as provided for in s.817.155, F.S.)	nber. s document herein are true.