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EXAMINER

COVER LETTER

Registration Section

TO:

Division of Corporations			
SUBJECT: Susan Willis Jewelry 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:			
Susan Willis Name of Person			
Curan Millio Investment I C			
Susan Willis Jewelry LLC Firm/Company			
13041 SW 40 Street			
Address Address			
Davie, FL 33330	M ∑	 	
City/State and Zip Code		\subseteq	Early 1
suni123@bellsouth.net	<u> </u>		_ 5
E-mail address: (to be used for future annual report notification)	ñet ⊓c₃	7	
For further information concerning this matter, please call:	n デジ 2法。	**	(1)
Susan Willis at (954) 646-6179		(***)	
Name of Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$ Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	f Statu py	s &	
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:	
Susan Willis Jewelry LLC (Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
ine mailing address and street address of the pri	incipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
13041 SW 40 Street	Same
Davie, FL 33330	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registations business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Susan Willis	ASSET 7
Name	me P I
13041 SW 40 Str	eet <u>Eg</u> # E
Florida street add	ress (P.O. Box NOT acceptable)

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

Davie,

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Susan Willis
	13041 SW 40 Street
	Davie, FL 33330
(Use attachment if necessary)	
	n the date of filing: (OPTIONAL)
	ist be specific and cannot be more than five business days prio
90 days after the date of filing.)	
REQUIRED SIGNATURE:	
RECURED SIGNATURE.	. 1
	1.7.///
X	Was Wille "
Signature of a me	ember or an authorized representative of a member.
(In annual was with postio	- 609 409(2) Florido Statutos the apportion of this document
	n 608.408(3), Florida Statutes, the execution of this documents under the penalties of perjury that the facts stated herein are true.
I am aware that any false i	information submitted in a document to the Department of State
	felony as provided for in s.817.155, F.S.)
Susan Will	
	Typed or printed name of signee
_	70 11
Filing Fees:	Do A
	
\$125.00 Filing Fee for Articles of	Organization and Designation

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)