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(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	(	(Requestor's Name)
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# PAUL& ELKIND, P.A.

## ATTORNEYS AT LAW

HARLAN L. PAUL \*
DARREN J. ELKIND \*
MATTHEW D. BRANZ †
MICHAEL P. KELTON

142 EAST NEW YORK AVENUE DELAND, FLORIDA 32724 PHONE 386-734-3020 FACSIMILE: 386-734-3096 505 DELTONA BOULEVARD SUITE 105 DELTONA. FL 32725 PHONE: 386-574-5634 FACSIMILE: 386-574-5665

\* Board Certified Civil Trial Lawyer † LLM in Elder Law REPLY TO: DeLand

June 24, 2011

### VIA CERTIFIED RETURN RECEIPT MAIL: 7010 3090 0001 9419 5896

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Enchanted Botanicals, LLC

Dear Sir or Madam:

Enclosed you will find Articles of Organization and our firm's check # 4196 in the amount of \$125.00 for the filing fee.

Please return all correspondence concerning this matter to the following:

Matthew D. Branz Paul & Elkind, PA 142 East New York Avenue DeLand, FL 32724

Future correspondence should be made to:

Donia E. Mitchell 2930 Lockwood Boulevard Deltona, FL 32738

E-mail address (to be used for future annual report notification): mitchell.chris@gmail.com

For further information concerning this matter, please call: Matthew D. Branz, Esquire at (386) 34-3020.

Very truly yours,

PAUL & ELKIND, P.A.

Matthew D. Branz / sm

Matthew D. Branz
Signed in the absence to avoid delay in mailing

MDB/vm Enclosure(s)

# ARTICLES OF ORGANIZATION OF ENCHANTED BOTANICALS, LLC

#### **ARTICLE I - NAME**

The name of the limited liability company is Enchanted Botanicals, LLC, ("company").

#### **ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

120 South Woodland Boulevard, Unit 2 DeLand, Florida 32724

120 South Woodland Boulevard, Unit 2

la 32724 DeLand, Florida 32724

### ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Donia Elizabeth Mitchell 2930 Lockwood Boulevard Deltona, Florida 32738

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..

Donia Elizabeth Mitchell

### ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"MGMR" = Managing Member

**MGMR** 

Donia Elizabeth Mitchell 2930 Lockwood Boulevard Deltona, Florida 32738

**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.)

Donia Elizabeth Mitchell

Typed or printed name of signee