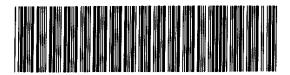
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Danielle L Wright
Danielle L Wright 6812 Aramon Ct. Wesley Chapel, FL 33545
Wesley Chapel, FL
33545
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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B Tedlock JUL

COVERLETTER - Attn Brenda Tadlock

TOï	Registration Section Division of Corporations	;·
SUBJE	CT: OT Pie Boutique	LLC ted Liability Company
The end	closed Articles of Organization and fee(s) are	submitted for filing.
Please	return all correspondence concerning this mat	tter to the following:
	Danielle L. Wrig	Name of Person
		Firm/Company
	6812 Aran	non Court Address
,	Wesley Chape	ty/State and Zip Code Schoutique - com for future annual Report notification)
-	danielle c gtp	for future annual Report notification)
For fun	ther information concerning this matter, pleas	e call:
Do	nielle L. Wright Kimble Name of Person	at (<u>813</u>) <u>907 251 3</u> Area Code & Daytime Telephone Number
Enclos	ed is a check for the following amount:	
[\$125 .00	Filing Fee \$\int\\$\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee. Certified Copy (additional copy is enclosed) S160.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	y is:
OT Pie Bowique L. (Must end with the words "Limited I	L.C
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "L1.C.")
ARTICLE II - Address:	
	ne principal office of the Limited Liability Company is:
The manning address and street address of the	te principal office of the Emmed Elability Company is.
Principal Office Address:	Mailing Address:
6812 Aramon Ct.	6812 Aramon Ct.
Wesley Chapel, FL 33545	12812 Aramon Ct. Wesley Chapel, FL 33545
	1000 00 1. 1. 4.0. 4
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
business entity with an active Florida registration.)	E STEEL STEE
•	

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

Danielle Wright-Kimble

68) 2 Aramon C+
Florida street address (P.O. Box NOT acceptable)

Wesley Chapel FL 33545
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.

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Danielle L Wright Kimble 6812 Arramon Ct. Wesley Chapel, FL 33545
Use attachment if necessary)	
EV: Effective date, if other than the ective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTION e specific and cannot be more than five business d
REQUIRED SIGNATURE:	
Carille &	widko

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)

Danielle L. Wright-Kimble
Typed or printed name of signee