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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | s of Status |
| Special Instructions to f | Filing Officer: | |
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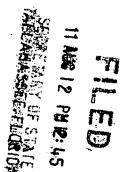
AUG 1 2 2011

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: Glos Boutique UC 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: |
| Kerri Bryon |
| Name of Person |
| |
| Firm/Company |
| 2951 Huntington Dr. Address |
| Tallahassee, FL 32308 City/State and Zip Code |
| the gloss houtique @ yahoo. com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Name of Person at (950) 264.2133 Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\ \text{Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed) |
| Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations |

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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 | : |
|---|---|
| Choss Boutique (Must end with the words "Limited Liab | ility Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the p | principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 2951 Huntington Dr. Tallahasses, Ft 32308 | Sarae |
| ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) | istered Agent. You must designate an individual or another |
| The name and the Florida street address of the | registered agent are: |
| 2951 Huntingto Florida street ad | ddress (P.O. Box <u>NOT</u> acceptable) |
| (allahassec City, S | FL 32308 State, and Zip |
| liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p | accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S |
| Registered Agent's Sign | \$27 N |

(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:

| "MGRM" = Managing Member | Name and Address: |
|---|---|
| MERM | Levri Bryon 2951 Huntington Dr- Tallahassee, R 32308 |
| MARM | Lovie Rug 2951 Huntipoton Dr Tallahassee, FL 32308 |
| | |
| | |
| (Use attachment if necessary) RTICLE V: Effective date, if other than the fan effective date is listed, the date must or 90 days after the date of filing.) | ne date of filing: (OPTIONAL) be specific and cannot be more than five business days prior |
| RTICLE V: Effective date, if other than the fan effective date is listed, the date must | ne date of filing: (OPTIONAL) be specific and cannot be more than five business days prior |
| RTICLE V: Effective date, if other than the fan effective date is listed, the date must or 90 days after the date of filing.) REQUIRED SIGNATURE: | be specific and cannot be more than five business days prior ber or an authorized representative of a member. |
| RTICLE V: Effective date, if other than the fan effective date is listed, the date must or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with section 6 constitutes an affirmation und I am aware that any false inforconstitutes a third degree felo | ber or an authorized representative of a member. 08.408(3), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein action submitted in a document to the Department of the penalties on a provided for in s.817.155, F.S.) |