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Effective Date 7/23/11

SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. HAMPTON

SEP A 7 2011

EXAMINER

### **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: d'Belli,	LLC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of O	rganization and fee(s) are	submitted for filing.	
Please return all correspon	dence concerning this mate	ter to the following:	
Tiffany L.	Marcos		
·		Name of Person	
d'Belli, LL	С		
<del>, , , , , , , , , , , , , , , , , , , </del>		Firm/Company	
620 Shro	pshire Loop		
		Address	
Sanford, FL 3	32771		
	Cit	y/State and Zip Code	
tiffanymarcos	s17@gmail.com		
	E-mail address: (to be used to	or future annual report notification)	
For further information con	ncerning this matter, please	e call:	
Tiffany Marcos		at (321 ) 246-738 Area Code & Daytime Tel	39
Name of I	Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check for t	he following amount:		
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 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 Corporation Clifton Building 2661 Executive Center	ns Circle

## Effective Date 9/23/11

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•	
ARTICLE I - Name:	
The name of the Limited Liability Comp	pany is:
AID AIR LLO	
d'Belli, LLC	
(Must end with the words "Limi	ted Liability Company, "L.L.C.," or "LLC,")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company is:
The maning basis, and made address, a	in the principal critics of the Billion Blacking Company in
Principal Office Address:	Mailing Address:
620 Shropshire Loop	620 Shropshire Loop
Sanford, FL 32771	Sanford, FL 32771
AND THE REAL PROPERTY OF THE P	
	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another
The name and the Florida street address	of the registered agent are:
Tiffany L. Marco	os
<del> </del>	Name

620 Shropshire Loop

Florida street address (P.O. Box NOT acceptable)

Sanford, FL 32771

FL

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..

(CONTINUED)

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### ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Tiffany L. Marcos
	620 Shropshire Loop
	Sanford, FL 32771
MGR	Yvonne R. FLanagan
	2235 Windsor Crest Loop
	Apopka, FL 32712
	***************************************
	NAME OF THE PROPERTY OF THE PR
77 v 1 v 10	
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: September 23, 2011

\_. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member of an authorized representative of a member.

(In accordance with section 60) 408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Tiffany L. Marcos

Typed or printed name of signee

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)

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