L11000120437

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
Certified Copies Certificates of Status
Solution copies
Special Instructions to Filing Officer:

Office Use Only

EFFECTIVE DATE 10 13 11



200213362662

10/20/11--01008--014 **125.00

FILED

III OCT 20 AU DO 30

SECRETARY OF STATE FALL AHASSEE, FLORIDA

D. BRUCE OCT 21 2011 EXAMINER

COVER LETTER

TO:	Registration of	on Section f Corporations		
SUBJ	ECT: ISA	BELLE FAUCHER	, LLC	
		Name of Limit	ted Liability Company	
The e	nclosed Article	es of Organization and fee(s) are	submitted for filing.	
Please	return all cor	respondence concerning this mat	ter to the following:	
	Isabelle	e Faucher		
			Name of Person	
	ISABEI	LLE FAUCHER, LL	.C	Zes =
			Firm/Company	A.R. 8
	1251 S	.E. 9th Avenue		20 ASSI
			Address	
	Pompane	o Beach, Florida 330	60	STA STA
			ly/State and Zip Code	Om O
	isabellefa	ucher@bellsouth.net		
			for future annual report notification)	
For fu	rther informati	ion concerning this matter, please	e call:	
Isab	elle Fauch	ner	at (954) 464-5839	
	Na	me of Person	Area Code & Daytime Telephone Nu	mber
Enclo	sed is a checl	k for the following amount:		
	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certifi (additional copy is enclosed) Certifi	00 Filing Fee, cate of Status & ed Copy nal 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 Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R1	П	CI	Æ	I	-]	Na	me	
---	----	---	----	---	---	-----	----	----	--

The name of the Limited Liability Company is:

ISABELLE FAUCHER, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1251 S.E. 9th Avenue

Pompano Beach, FL 33060

1251 S.E. 9th Avenue Pompano Beach, FL 33060

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual of another business entity with an active Florida registration.)

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

Isabelle Faucher

Name

1251 S.E. 9th Avenue

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

Pompano Beach

_{FL} 33060

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



ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGR** Isabelle Faucher 1251 S.E. 9th Avenue Pompano Beach, FL 33060 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: October 132011 (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 or an authorized representative of a member.

Isabelle Faucher

Typed or printed name of signee

(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 frue I am aware that any false information submitted in a document to the Department of the penalties of the penalties of perjury that the facts stated herein are frue.

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)