## L 111111 131764

(Re	questor's Name)	
(Add	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	<del> </del>
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only

B. KOHR
NOV. 2 1 2011
EXAMINER



700214364187

11/18/11--01032--021 \*\*155.00



## **COVER LETTER**

TO:

Registration Section

EFFECTIVE DATE

Division of Corporations International American Miss Pageants SUBJECT: 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: Anthony Nicholas Galizia Sr. **International American Miss Pageants** Firm/Company 15819 95th Lane North Address West Palm Beach, Florida 33412 City/State and Zip Code antman7828@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Anthony N. Galizia Sr. 262-1913 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: **√**\$155.00 Filing Fee & \$125.00 Filing Fee \$130.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address** Street/Courier Address Registration Section Registration Section

> Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

EFFECTIVE DATE 1/1/2012

## ARTICLE I - Name: The name of the Limited Liability Company is: International American Miss Pageants, 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:

15819 95th Lane North

West Palm Beach, Florida

33412

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 or another business entity with an active Florida registration.)

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

15819 95th Lane North

West Palm Beach, Florida

33412

Anthony N. Galiz	ia Sr.
Name	
15819 95th Lan	e North
Florida street address	(P.O. Box NOT acceptable)
West Palm Beach FL	33412
City, State, a	nd 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:

"MGR" = Manager "MGRM" = Managing Men	Name and Address:
MGR	Anthony N. Galizia Sr.
***** ********************************	15819 95th Lane North
	West Palm Beach, Florida 33412
<del></del>	
	· · · · · · · · · · · · · · · · · · ·
Ø I	<b>\</b>
	r than the date of filing: January 1, 2012 (OPTIONAL) te must be specific and cannot be more than five business days price
RTICLE V: Effective date, if othe fan effective date is listed, the date	than the date of filing: January 1, 2012 (OPTIONAL)  The must be specific and cannot be more than five business days price.)  The date of filing: January 1, 2012 (OPTIONAL)  The must be specific and cannot be more than five business days price.
RTICLE V: Effective date, if othe f an effective date is listed, the date or 90 days after the date of filing.  REQUIRED SIGNATURE Signature of the date of filing.  (In accordance with a constitutes an affirm I am aware that any	r than the date of filing: January 1, 2012 (OPTIONAL)  the must be specific and cannot be more than five business days price  f a member or an authorized representative of a member.  Section 608.408(3), Florida Statutes, the execution of this document attion under the penalties of perjury that the facts stated herein are true. false information submitted in a document to the Department of State
RTICLE V: Effective date, if othe f an effective date is listed, the date or 90 days after the date of filing.  REQUIRED SIGNATURE Signature of the date of filing.  (In accordance with a constitutes an affirm I am aware that any	r than the date of filing:

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)