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C. LEWIS

DEC 9 7941

EXAMINER

# **COVER LETTER**

Registration Section

TO:

, Division of Corporations
SUBJECT: LITTLE BEE INVESTMENTS, LLC
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:
WILLIAM T. GREENE
Name of Person
LITTLE BEE INVESTMENTS, LLC
Firm/Company
533 ALDENHAM LANE
Address
ORMOND BEACH, FLORIDA 32174
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
WILLIAM T. GREENE at (386) 677-8351  Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}  \$125.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:

# LITTLE BEE INVESTMENTS, 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:** 

533 ALDENHAM LANE

ORMOND BEACH, FLORIDA 32174

533 ALDENHAM LANE ORMOND BEACH, FLORIDA 32174

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:

WILLIAM TELFORD GREENE

Name

533 ALDENHAM LANE

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

ORMOND BEACH

<sub>FL</sub> 32174

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' Signature (REQUIRED

(CONTINUED)

Page 1 of 2

FILED

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

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

2011 DEC -8 AM 18 27

MGRM	William Telford Greene	•
	533 Aldenham Lane	
	Ormond Beach, FL 32174	
MGRM	Barbara A. DeGeorgio	
	533 Aldenham Lane	
	Ormond Beach, FL 32174	
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Use attachment if necessary)		-
.E.V: Effective date, if other than	the date of filing:	. (OPTIONAL)

**REQUIRED SIGNATURE:** 

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

(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 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.)

BARBARA A. DeGEORGIO

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)