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(Re	equestor's Name)		
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PICK-UP	☐ WAIT	MAIL	
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(Document Number)			
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SEGNASSEE: FLORID

B. BOSTICK
DEC 3 0 2011
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Blinds by Rar	ndy, LLc		
Subject.	Name of Limited Liability (	Company	
The enclosed Articles of Organization	n and fee(s) are submitted for	r filing.	
Please return all correspondence con	cerning this matter to the foll	owing:	
Randolph White			
	Name of Pers	ion	
	Firm/Compa	nv	
2313 NW 86th St	·	- <b>v</b>	
2313 1444 00111 01	Address		
Miami, Fl. 33147			
hlindah mandi Quaha	City/State and Zi	p Code	
blindsbyrandy@yaho E-mail add	dress: (to be used for future annu	al report notification)	
For further information concerning the	nis matter, please call:		SEC SEC
Randolph White	at ( 305	300-1147	ohone Number 552
Name of Person	Area	a Code & Daytime Telep	(FI) 15 kg
Enclosed is a check for the follow	ing amount:		
	te of Status Certifie	Filing Fee & ed Copy (al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
P.O. Box	on Section Reg of Corporations Div 6327 Clir ee, FL 32314 266	gistration Section vision of Corporations from Building 1 Executive Center Citlahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nat The name of the L		ity Company is:				
Blinds by R	andy, LL	С				
(M	ust end with the w	vords "Limited Liabili	ty Company, "L.L.C.," or "LLC.")			
ARTICLE II - Ac The mailing addre		address of the pr	ncipal office of the Limited I	Liability Co	ompai	ıy is:
Principal Office A	Address:		Mailing Address:			
2313 NW 86th Stre	et		2313 NW 86th Street			
Miami, Fl. 33147		·	Miami, Fl. 33147			
business entity with an	active Florida reg Florida street	address of the re	ered Agent. You must designate an ind egistered agent are:	ividual or ano		
	Randolph	Name		<b>三</b>	30	-
	2313 N	W 86th St	reet	AHASSEE	11 DEC 28	# BI HALMERIAN TO SECURITY
	Florida street address (P.O. Box NOT acceptable)			-0	51	
	Miami		<sub>FL</sub> 33147		1 5: 0	-
		City, Sta	te, and Zip	FLORIDA	05	
liability compa registered agent a	my at the place and agree to ac	e designated in the control of the c	accept service of process for the his certificate, I hereby accept to I further agree to comply with formance of my duties, and I	the appoin ith the prov	tment isions	as of all

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(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	Randolph White	_
	2313 NW 86th Street	_
	Miami, FI,,33147	_
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(Use attachment if necessary)		
	nan the date of filing: January 01, 2012 (OPTI	

**ARTIC** (If an el to or 90

**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.)

Randolph White

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)