# L120000050de

(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

# **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: Melino	da's Treasures, L	LC	
-	Name of Limit	ed Liability Company	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspondent	ondence concerning this matt	ter to the following:	
Melinda N	<u>Marino</u>		
		Name of Person	
Melinda's	Treasures		
<del></del>		Firm/Company	
4433 Gun	n Hwy		
		Address	
Tampa, FL	33618		
<del></del>		y/State and Zip Code	
Melinda@m	elindastreasures.com	n future annual report notification)	
For further information of	concerning this matter, please	• •	
•	, promo	, <del></del>	
Melinda Marino		at ( 813 ) 2638299	
Name o	of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check fo	r the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 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 Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Δ	RT	ICL	$\mathbf{F}^{-1}$	r _ '	Na	me
$\boldsymbol{\Box}$	. 17	I V J L	/ L'A .	_	1451	me.

The name of the Limited Liability Company is:

## Melinda's Treasure's, 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:
4433 Gunn Hwy	15123 Naturewalk Drive
Tampa, FL 33618	Tampa, FL 33624

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:

Frank Marino
Name

## Universal Realty Group, Inc.

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

4435 Gunn Hwy Tampa  $_{\rm FL}$  33618

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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Meml	ber
MGRM	Melinda Marino
WORW	15123 Naturewalk Drive
	Tampa, FL 33624
MGR	Frank Marino
	15123 Naturewalk Drive
	Tampa, FL 33624
- 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12	
	- <del></del> -
(Use attachment if naccessmi)	
(Use attachment if necessary)	)
ICLE V: Effective date, if other	than the date of filing: (OPTIONAL)
n effective date is listed, the date	e must be specific and cannot be more than five business days prior
90 days after the date of filing.)	
REQUIRED SIGNATURE	
$M_{i}$	iunda Marino

(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.)

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

#### Melinda Marino

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)