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| (Re                     | questor's Name)   |                                       |
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| PICK-UP                 | ☐ WAIT            | MAIL                                  |
| (Bu:                    | siness Entity Nar | ne)                                   |
| (Do                     | cument Number)    |                                       |
| Certified Copies        | _ Certificates    | s of Status                           |
| Special Instructions to | Filing Officer:   |                                       |
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SECRETARY OF STATE ORIDA

EXAMINER
JAN 27 2012

# **COVER LETTER**

τ̈O:

**Registration Section** 

| Division of Corporations  |   |   |
|---|---|---|
| SUBJECT: J STEF   | ANSIC INTERIORS   | S, LLC  |
| 1   | Name of Limited Liability Comp  | any   |
| The enclosed Articles of Organization                                     | and fee(s) are submitted for filin  | g.  |
| Please return all correspondence conce                                    | rning this matter to the following  | g:  |
| Carol Jeanne Ste  | fansic  |   |
|   | Name of Person  |   |
| J STEFANSIC IN  | ΓERIORS, LLC  |   |
|   | Firm/Company  |   |
| 532 27th St.  |   |   |
|   | Address ,   |   |
| West Dalm Beech E   | ilorida 22407   |   |
| West Palm Beach, F  | City/State and Zip Code   | e   |
| jeannestef@att.net  | 51.5/.5 tall 2.p 55 tall  |   |
|   | ess: (to be used for future annual rep  | ort notification)   |
| For further information concerning this                                   | matter, please call:  |   |
| Carol Jeanne Stefansic  | at (561   | 427-8758  |
| Name of Person  | Area Code   | e & Daytime Telephone Number  |
| Enclosed is a check for the following                                     | g amount:   |   |
| \$125.00 Filing Fee \$130.00 Fil Certificate                              |   | py Certificate of Status &  |
| Mailing Ade<br>Registration<br>Division of<br>P.O. Box 63<br>Tallahassee, | Section Registrat<br>Corporations Division<br>27 Clifton E<br>FL 32314 2661 Exc | ourier Address ion Section of Corporations Building ecutive Center Circle see, FL 32301 |

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

| A | RT | CI | Æ | I _ ` | Na | me | ٠. |
|---|----|----|---|-------|----|----|----|
|   |    |    |   |       |    |    |    |

The name of the Limited Liability Company is:

# J STEFANSIC INTERIORS, 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:               |
|--------------------------------|--------------------------------|
| 532 27th St.                   | 532 27th St.                   |
| West Palm Beach, Florida 33407 | West Palm Beach, Florida 33407 |

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:

Carol Jeanne Stefansic

Name

532 27th St.

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

West Palm Beach

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)

## 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                |  |
| MGRM                                    | Carol Jeanne Stefansic                                     |
|   | 532 27th St.   |
|   | West Palm Beach, Florida 33407                             |
| MGRM                                    | William Alan Stefansic                                     |
|   | 532 27th St.   |
|   | West Palm Beach, Florida 33407                             |
|   | West Paim Beach, Florida 33407                             |
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| (Use attachment if necessary)           |  |
| •                                       |  |
| ICLE V: Effective date, if other than t | the date of filing: (OPTIONAL)                             |
| effective date is listed, the date must | t be specific and cannot be more than five business days p |
|   | t be specific and cannot be more than five business days p |
| 90 days after the date of filing.)      |  |
|   |  |
| DECLINED OLON A BURE                    |  |
| 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.)

## Carol Jeanne Stefansic

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)