# 120005461

| (Requestor's Name)                      |             |
|---|-------------|
| (Address)                               |             |
| (Address)                               |             |
| (City/State/Zip/Phone #)                |             |
| PICK-UP WAIT MAI                        | L           |
| (Business Entity Name)                  |             |
| (Document Number)                       |             |
| Certified Copies Certificates of Status | <del></del> |
| Special Instructions to Filing Officer: |             |
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Office Use Only

G. MCLEOD

APR 23 2012

**EXAMINER** 



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12 APR 20 PM 2:53

# **COVER LETTER**

TO:

**Registration Section** 

| Division of Corporations  |
|---|
| SUBJECT: MARGARET'S INTERIOR DECOR 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:   |
| MARGARET CLEMENS Name of Person   |
| MARGARET INTERIOR DECOR LLC. Firm/Company   |
| 1300 NE JENSEN BEACH BLUD  Address  |
| JENSEN BEACH, FL, 34957.  City/State and Zip Code   |
| E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| MARGARET CLEMENS at (772) 284 5388  Name of Person Area Code & Daytime Telephone Number   |
| Enclosed is a check for the following amount:   |
| \$125.00 Filing Fee \$\times 130.00 Filing Fee & Certificate of Status \$\times 155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301                                    |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

| The name of the Limited Liability Company is:  |             |        |        |
|--|-------------|--------|--------|
| MARGARET'S INTERIOR DECOR LI (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")   | <u>_</u> C. |        |        |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liabi  | lity Con    | ıpany  | / is   |
| Principal Office Address: Mailing Address:   |             |        |        |
| 1300 NE JENSEN BEACHBUD 1300 NE JENSEN BEACH TENSEN BEACH |             |        |        |
| (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individua business entity with an active Florida registration.)   |             |        |        |
| The name and the Florida street address of the registered agent are:   |             | 12     |        |
| MARGARET CLEMENS Name  |             | APR 20 | 1900 a |
| 2424 NE 16th Court Florida street address (P.O. Box NOT acceptable)  |             | PH 2:  |        |
| JENSEN BEACH FL 31957 City, State, and Zip   |             | చ్     |        |

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:

| Title:  | Name and Address:  |
|---|--|
| "MGR" = Manager "MGRM" = Managing Member  MGR - Manager  Manager        | MARGARET CLEMENS MGR<br>2424 NE 16 <sup>th</sup> COURT<br>JENSEN BERCH, FL., 34957 |
|   |  |
|   |  |
| (Use attachment if necessary)  CLE V: Effective date, if other than the | date of filing: OU 17 2012 (OPTIONAL)  |

ARTICLE V: Effective date, if other than the date of filing: Our 17 QOIX (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

#### **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.)

MARGARET CLEMENS
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)