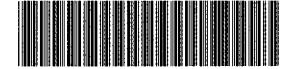
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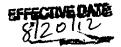
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PICK-UP WAIT MAIL					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
<b>3</b>					

Office Use Only



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## **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations							
SUBJECT: SHOE TERRACE							
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:							
SONIA FRANCOIS							
Name of Person							
Firm/Company							
706 SW 79TH AVE							
Address							
North Lauderdale, FL 33068							
City/State and Zip Code							
shoeterrace@yahoo.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
SONIA FRANCOIS at (786 ) 4224625							
Name of Person Area Code & Daytime Telephone Number							
Enclosed is a check for the following amount:  \$125.00 Filing Fee \$\times \text{S155.00 Filing Fee} & \times \text{S155.00 Filing Fee} & \times \text{Certified Copy} &							
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314  Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32314  2661 Executive Center Circle							

Check# 500

Tallahassee, FL 32301

A 100 pt

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

# SHOE TERRACE, 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:** 

706 SW 79TH AVE

N LAUDERDALE, FL 33068

706 SW 79TH AVE

N LAUDERDALE, FL 33068

# 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:

**SONIA FRANCOIS** 

Name

**706 SW 79TH AVE** 

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

N LAUDERDALE

... 33068

City, State, and Zip

FILED

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SLCKLTARY OF STATE
TAIL AHASSEE, FLORDA

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 "MGRM" = Managing Member	Name and Address:				
MGR	SONIA FRANCOIS 706 SW 79TH AVE NORTH LAUDERDALE, FL 33068				
MGR	LORVIA FRANCOIS 706 SW 79TH AVE				
	NORTH LAUDERDALE, FL 33068				
(Use attachment if necessary)					
ARTICLE V: Effective date, if other than the date	e of filing: MgVs+20,2012 (OPTIONAL) ecific and cannot be more than five business days prior				
REQUIRED SIGNATURE:					
	ECC &				
(In accordance with section 608.408 constitutes an affirmation under the I am aware that any false informatic constitutes a third degree felony as SONIA FRANCO					

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)