

# L12000143758

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

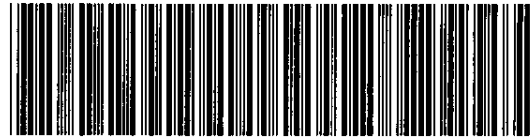
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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C. LEWIS  
Nov 14 2012  
EXAMINER

**TRANSMITTAL LETTER**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314  
850-487-6051

**SUBJECT: COUTURE BRIDE & EVENTS, LLC.**

Enclosed are an original and one copy of the articles of Organization For Florida Limited Liability Company.

**FROM: CATHY FISCHER**  
PO Box 781352  
Sebastian, Florida 32978  
772-913-3337; 772-589-1179

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I-Name:

The name of the Limited Liability Company shall be: **COUTURE BRIDE & EVENTS, LLC.**

### ARTICLE II-Address:

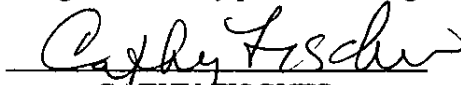
The mailing address and street address of the principal office of the Limited Liability Company is: PO Box 781352, Sebastian, Florida 32978 and principal address is 7955 91<sup>st</sup> Avenue, Vero Beach, Florida 32967

### ARTICLE III-Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

CATHY FISCHER  
7955 91<sup>st</sup> Avenue  
Vero Beach, Florida 32967

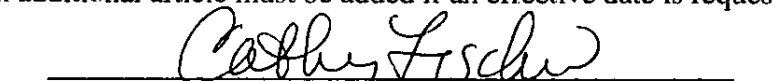
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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..

  
CATHY FISCHER

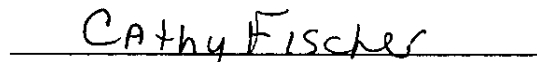
### ARTICLE IV- Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager- managed company.

(An additional article must be added if an effective date is requested)

  
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.)

  
Typed or printed name of signee

#### FILING FEES:

- \$100.00 Filing Fee for Articles of Organization
- \$25.00 Designation of Registered Agent
- \$30.00 Certified Copy (Optional)
- \$5.00 Certificate of Status (Optional)

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