

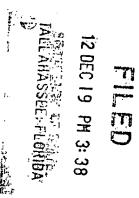
(Rec	questor's Name)	
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PICK-UP	WAIT	MAIL
(But	siness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

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B. BOSTICK
DEC 2 0 2012
EXAMINER

COVER LETTER

TO:	Registration S Division of Co						
		em At A Time, LLC.					
SUBJ	ECT:	Name of Limit	ed Liability Co	mpany	<u></u>		
The er	iclosed Articles o	of Organization and fee(s) are	submitted for fi	iling.			
Please	return all corresp	ondence concerning this matt	er to the follow	/ing:			
	Brenda L. M	_		-			
	 		Name of Person	<u> </u>			
	One Gem A	t A Time					
			Firm/Company	,			
	171 N River	Dr E					
			Address				
	Jupiter FL 3	3458					
	blynnmorris		y/State and Zip (Code			
		E-mail address: (to be used	for future annual	report notification	on)	E.	———— - কেটিং
For fu	rther information	concerning this matter, please	call:			D 30	元 元 元
Bren	da L.Morris		561	762-66	02	ASS	9
	Name	of Person		Code & Daytime	Telephone N	umber 🗀 🔄	P D
Enclo	sed is a check f	or the following amount:					3: 38
⊒ \$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified		Certi) Certi	.00 Filing Foificate of Statified Copy	tus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regis Divis Clifto	et/Courier Addr stration Section sion of Corporat on Building Executive Cent	tions		,

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Con	npany is:
One Gem At A Time, LLC.	
(Must end with the words "Li	mited 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:
171 N River Dr E	171 N River Dr E
Jupiter FL 33458	Jupiter FL 33458

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:

Cris Lapig	之系统	72	
Name		品	771
1343 Beacon Cir	S	613	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Florida street address (P.O. Box NOT acceptable)			m
Wellington FL 33414	-	بد بن	
City, State, and Zip	OR NO	: 3 : 38	

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 Member	ſ
MGR	Brenda L. Morris
	171 N River Dr E Jupiter FL 33458
	DEC
-	
	—
(Use attachment if necessary)	en de la companya de
	nan the date of filing: (OPTIONAL) e must be specific and cannot be more than five business d ing.)
REQUIRED SIGNATURE:	Λ
	member or an authorized representative of a member.
Signature of ac	

Brenda L. Morris

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)