## L13000003614

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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T. CLINE
JAN - 8 2013
EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJE	ECT: Kayling's Boutique LLC  Name of Limited Liability Company	
The end	closed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Nhan Name of Rersolf	
-	Kaylina's Boutique LLC Firm/Company	<del></del>
	· ·	
	5437 Lehigh Ave	<u> </u>
-	Orlando, FL 32807 City/State and Zip Code	<del></del>
	Hoainhan 82@ amail. com E-mail address: (to be used for future annual report notification)	20
_	E-mail address: (to be used for future annual report notification)	
For fur	ther information concerning this matter, please call:	
	Name of Person at (917) 270-6759 FOR Area Code & Daytime Telephone Number 500	20 3 JAN -7 MIT 50
Enclos	sed is a check for the following amount:	50
\$125.00	Filing Fee \$\bigs\tag{\text{\$130.00 Filing Fee & Certificate of Status}}\$  Certificate of Status \$\text{\$155.00 Filing Fee & Certificate of Status}\$  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	ıs &
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE I - Name:</b> The name of the Limited Liability Company is:	
Kaulina's B	ontique LLC
(Must end with the words "Limited Liabit	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5437 Lehiah Ave	5437 Lehigh Ave
Orlando, Fl 32807	Ociando, PC 3 2807
Orlando	registered agent are:
Having been named as registered agent and to	accept service of process for the above stated limited

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: $\overline{\text{"MGR"}} = \text{Manager}$ "MGRM" = Managing Member MGR (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (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.) Nhan Namen 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)