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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

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SEGRETARY OF STATE

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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 10, 2012

ELISA HALL 2082 ARBOUR WALK CIRCLE #3116 NAPLES, FL 34109

SUBJECT: STYLE BY ELISA, LLC Ref. Number: W12000061057

We have received your document for STYLE BY ELISA, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the fame and address of each manager listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 512A00029125

COVER LETTER

TO: **Registration Section Division of Corporations**

Style By Elisa

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:

Name of Person	
Firm/Company	
2082 Arbour Walk Circle #3116	201 SE
Address	A REE
Naples, FL 34109	Dec -1 ETARY HASSE
City/State and Zip Code	THE A
edwstyle@yahoo.com	ST ST
E-mail address: (to be used for future annual report notification)	000 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5

For fu

Elisa Hall

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy

(additional copy is enclosed)

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

(additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Style By Elisa, LLC	
(Must end with the words "Limite	d 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:
Style By Elisa	Style By Elisa
2082 Arbour Walk Circle #3116	2082 Arbour Walk Circle #3116
Naples, FL 34109 ARTICLE III - Registered Agent, Regi	Naples, FL 34109 Stered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or mother The registered agent are:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or inother The registered agent are:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or mother The registered agent are:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address o Elisa D Háll 2082 Arbour Walk Circle #3	stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or inother The registered agent are:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address o Elisa D Háll 2082 Arbour Walk Circle #3	stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another The registered agent are:

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

Title:		Name and Address:	
"MGR" = Manage			
"MGRM" = Mana	ging Member		
MGRM		Elisa D Hall	
	_	2082 Arbour Walk Circle #3116	
		Naples, FL 34109	
	_		
			
	_		
	ate, if other than the da	ate of filing: Jan. 1, 2013 (OPTION e specific and cannot be more than five busin	
LE V: Effective d	late, if other than the da		
LE V: Effective d ffective date is list or 90 days after t	late, if other than the da sted, the date must be the date of filing.)		
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LE V: Effective d ffective date is list or 90 days after t REQUIRED SIG	late, if other than the dated, the date must be the date of filing.) ENATURE: Signature of a member of the date with section 608.40 tes an affirmation under the lare that any false informatic	r an authorized representative of a member. 8(3), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true.	ess
LE V: Effective d ffective date is list or 90 days after t REQUIRED SIG	sted, the date must be the date of filing.) ENATURE: Signature of a member of ordance with section 608.40 tess an affirmation under the are that any false informatic less a third degree felony as	r an authorized representative of a member. 8(3), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true.	ess
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LE V: Effective d ffective date is list or 90 days after t REQUIRED SIG	sted, the date must be the date of filing.) ENATURE: Signature of a member of the date an affirmation under the are that any false informatic less a third degree felony as Elisa D Hall	r an authorized representative of a member. 8(3), Florida Statutes, the execution of this document on submitted in a document to the Department of State provided for in s.817.155, F.S.)	

ARTICLE IV- Manager(s) or Managing Member(s):