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SECRETARY OF STATE
TALL LHASSEE, FLORIN

#### Shannon Livingston

19580 Oak Forest Drive Fort Myers, FL 33967 Phone: 239.687.9008

## Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Phone: 850.245.6051

### Greetings,

Enclosed please find the necessary paperwork required to form an LLC for the business Jewelry Design 101. If you have any questions, or need additional information in order to process, please contact me at 239.687.9008 or through email at <a href="mailto:sfortune0216@aol.com">sfortune0216@aol.com</a>.

Best Regards

Shannon Livingston Jewelry Design 101

Shanna Livingston

1/7/2013

# **COVER LETTER**

TO:	Registration So Division of Co			
SUBJE	ст:	ewelry Designation	n 101 ed Liability Company	·
The enc	losed Articles of	Organization and fee(s) are s	submitted for filing.	
Please r	eturn all correspo	ondence concerning this matte	er to the following:	
-		Shannor	Livingston Name of Person	
-		Jeweli	My Design 101 Right/Company	
_		19580 Oak	Forest Dr. Address	
_	For	+ Myers, FL	33907 y/State and Zip Code	
		sfortur	or future annual report notification)	]
For furt	her information of	concerning this matter, please	call:	
_Sr	Name o	Livingston of Person	at ( <u>239</u> ) <u>L087</u> - Area Code & Daytime Telepl	9008 none Number
Enclos	ed is a check fo	or the following amount:		
<b>2</b> 125.0	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 Ci	rcle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is	3:
Jewelry Desig	in 101, LLC.
(Must end with the words) Limited Lial	bifity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the part of th	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
19580 Oak Forest Dr. Fort Myers, FL 33967	19580 Oakforest Dr. Fort Myers, FL 33967
	registered agent are:
liability company at the place designated in	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of

Registered Agent's Signature (REQUIRED)

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.

(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:
_mar_	Shannon Livingston 19580 Oak Forest Dr. Fort Myers, FL 33967
<del></del>	
(Use attachment if necessary)	
	ne date of filing: (OPTIONA
effective date is listed, the date mu o or 90 days after the date of filing.)	st be specific and cannot be more than five busines

**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.)

Shannon Livings 7n
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)