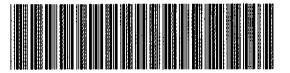
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(Re	questor's Name)	
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## **COVER LETTER**

TO: Registration Section	
Division of Corporations	
SUBJECT: Panache Shoes & Fashiover Rame of Limited Liability Company	<b>t</b> .
The enclosed Articles of Organization and fee(s) are submitted for filing.	STATE OF
Please return all correspondence concerning this matter to the following:	
Tawana A. Mills Name of Person	
Firm/Company	
24100 TalcoHills Dr. Apt B. Tallahassee, FL 323	20
Address	سر
Tallahassec, I 32363 City/State and Zip Code	
mills thirtyciant Tewana @ gmail.com E-mail address: (to be used for Educe annual report notification)	
For further information concerning this matter, please call:	
Tawana Mills at (850) 559-3647  Name of Person Area Code & Daytime Telephone Number	•
Enclosed is a check for the following amount:	
□\$125.00 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  Street/Courier Address Registration Section Division of Corporations Division of Corporations	

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

The name of the Limited Liability Company is:	SHEET STATE
Panache Shoes & Fashian LLC.  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	; (4)
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company's	
Principal Office Address: Mailing Address:	
2460 Talco Hills Dr. A.B. 2460 Talco Hills Dr. A.B. Tallahassee, FL. 32303	
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:  Name  Name	
20100 Talco Hills D. At B Florida street address (P.O. Box NOT acceptable)	
Tollahassee FL 32303 City, State, and Zip	
Having been named as registered agent and to accept service of process for the above stated limite 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.	f
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  MGRM	Damien Lizana 2460 Talco Hills Dr. Apt B Tallahassee, FL 32303
M 6 R	Tawana Mills 2460 Talco Hills Dr. AptB Tallahassee FL 32303
<u></u>	
	an the date of filing: (OPTIONAL)  must be specific and cannot be more than five business da  ng.)
REQUIRED SIGNATURE:	
(In accordance with secti	on 608.408(3), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true.

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)

Typed or printed name of signee

constitutes a third degree felony as provided for in s.817.155, F.S.)