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COVER LETTER

	Registration Section Division of Corporations
SUBJEC	
	Name of Limited Liability Company
The enclo	sed Articles of Organization and fee(s) are submitted for filing.
Please ret	urn all correspondence concerning this matter to the following:
	Berbara Meria Meitlan D
	De Vine Designs
	120 S.E. 12th Ave
	POMPANO Beach, FL 33060 City/State and Zip Code Kristen Occiana @ Qmail. com E-mail address: (to be used for future annual report notification)
For further	er information concerning this matter, please call:
Kris	Ten B. Adelmann at 754, 242 - 1679 Name of Person Area Code & Daytime Telephone Number
	l is a check for the following amount:
∆(\$125.00	Filing Fee Certificate of Status 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:

The name of the Limited Liability Company is:

FLORIDA FF	la LLC.
(Must end with the words "Limited Liability Co	ompany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princip	oal office of the Limited Liability Company is:
Principal Office Address:	ailing Address:
120 S.E. 12th Avenue P	20. BOX 10866
POMPZNO Brach, FL P	33061
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its own Registered Abusiness entity with an active Florida registration.)	
The name and the Florida street address of the regist	tered agent are:
Barbara Maria	SE TO
120 S.E. 12th Florida street address	Avenue (P.O. Box NOT acceptable)
Pompano Brack FL	33060

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..

City, State, and Zip

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 "MGRM" = Managing Member	Name and Address:
"MGR"	Kristen B. Adelmann 120 S.E. 12th Ave Pompano Brach, FL 33060
"MGRM"	Barbara M. Maitland 120 S.E. 12th Ave Pompano Beach, FL 33060

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>Solution</u> (OPTIONAL) (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.)

<u>Typed or printed name of signee</u>

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)