

L130000027768

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TALLAHASSEE FLORIDA

FEB 22 2012

D. BRUCE

EFFECTIVE DATE 03/01/13

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PINK CHAIR DESIGNS
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:

SUSAN W. JACOBS

Name of Person

Firm/Company

30 NEPTUNE DR.

Address

MARY ESTHER, FL 32569

City/State and Zip Code

YOMAMASOOZ @ COX.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUSAN W. JACOBS

Name of Person

at (850) 368-3335

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

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2018 FEB 21 PM 12:55
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TALLAHASSEE FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PINK CHAIR DESIGNS LLC
(Must end with the words "Limited 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:

30 NEPTUNE DR.
MARY ESTHER, FL 32569

Mailing Address:

30 NEPTUNE DR.
MARY ESTHER, FL 32569

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:

SUSAN W. JACOBS
Name

30 NEPTUNE DR.
Florida street address (P.O. Box **NOT** acceptable)

MARY ESTHER, FL 32569
City, State, and Zip

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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..

Susan W. Jacobs
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE 03/01/13

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

- The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

LINDA DEAN
24 MARINERS LN
MARY ESTHER, FL 32569

MGRM

SUSAN W. JACOBS
30 NEPTUNE DR
MARY ESTHER, FL 32569

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: MARCH 1, 2013 (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:

Susan W. Jacobs
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.)

SUSAN W. JACOBS
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)

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SECRETARY OF STATE
TALLAHASSEE FL 32399