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Office Use Only

EFFECTIVE DATE 03/01/13



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SECRETARY OF STATE

MAR 0 6 2013 D. BRUCE

## COVER LETTER

TO: **Registration Section Division of Corporations** A Floral With Flair, LLC 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: Kelly Guion Name of Person A Floral With Flair Firm/Company 7025 N Wickham Rd, Suite 110 Address Melbourne, FL 32940 City/State and Zip Code afloralflair@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kelly Guion Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □\$155.00 Filing Fee & □ \$160.00 Filing Fee, ■\$125.00 Filing Fee □\$130.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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

The name of the L	ime: Limited Liability Con	npany is:	
		·F	
A Floral With Flair, LL	.c		
(M	Aust end with the words "Li	mited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ddress:		
The mailing addre	ess and street address	of the principal office of the Limited	Liability Company is:
Principal Office	Address:	Mailing Address:	
7025 N. Wickham Rd		7025 N. Wickham Rd	
Suite 110		Suite 110	
Melbourne, FL 32940		Melbourne, FL 32940	
The name and the	Fiorida street addres  Kelly Guion	s of the registered agent are:	SECRI SECRI
	-	Name	AR -!
	7025 N Wickham Rd., \$	Sto 110	% <b>Σ υ Ι</b>
	Florida street address (P.O. Box NOT acceptable)		
	Florid		
	Florid		OF STATE
	Florid	a street address (P.O. Box NOT acceptable)	AMII: 29 OF STATE EFLORIDA

(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:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Kelly Guion
	7025 N. Wickham Rd., Ste 110
	Melboume, FL 32940
	<del>.</del>
	was also and the second the secon
	n the date of filing: March 1, 2013. (OPTIONAL) nust be specific and cannot be more than five business day g.)
REQUIRED SIGNATURE:	
Killy (	AHASS AS
Signature of a me	mber or an authorized representative of a member.
constitutes an affirmation u I am aware that any false in	and 608.408(3), Florida Statutes, the execution of this document and the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of states are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of perjury that the facts stated herein are the penalties of penalties
Kelly Guion	
	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)