

L13000064694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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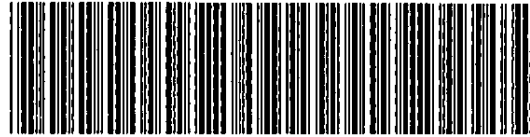
(Business Entity Name)

(Document Number)

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13 MAY -1 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
MAY 2 - 2013
EXAMINER

**WOMBLE
CARLYLE
SANDRIDGE
& RICE**

A LIMITED LIABILITY
PARTNERSHIP

One Wells Fargo Center
301 South College Street
Suite 3500
Charlotte, NC 28202-6037

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April 30, 2013

VIA FEDERAL EXPRESS

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Blue Sail Bedding, LLC (the "Company")

Dear Sir or Madam:

Enclosed for filing in your office, please find the following for the Company:

- (1) One original signed Articles of Organization; and
- (3) Our firm check in the amount of \$155.00 for filing fees and a certified copy.

Please return filed evidence of the formation to me in the enclosed federal express envelope. Please call me if you have any questions.

Sincerely,

WOMBLE CARLYLE SANDRIDGE & RICE
A Limited Liability Partnership



Pamela G. Speir
North Carolina Certified Paralegal

Enclosures

cc: Cyrus M. Johnson, Jr., Esq.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Blue Sail Bedding, 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:

Mailing Address:

8801 NW 109 Court

+

Unit 706

Doral, FL 33178

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:

Mauricio Anibal Lavie

Name

8801 NW 109 Court, Unit 706

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

Doral

FL 33178

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..

By:

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

MGR

Mauricio Anibal Lavie

8801 NW 109 Court, Unit 706

Doral, FL 33178

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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.)

Benjamin Barber, Member

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)