L13000131871

(Re	questor's Name)	
(Ad	dress)	
		•
(Ad	dress)	
•	,	
(0:1	- (Chaha Min (Dhana	- - -
(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
(= -	,	
0-46-40-4-	C-difference	a of Chahua
Certified Copies	_ Centificates	s or Status
Special Instructions to	Filing Officer:	
	•	

Office Use Only



700251616167

09/17/13--01015--009 **130.00

2013 SEP 17 PM 12: 24
SECRETARY OF STATE
TALL VIMSSEE FLORID.

COVER LETTER

TO:		istration S ision of Co	Section orporations			
CIIDTI	Б С Т.	•	y's Furniture Polish, LL	С		
SUBJ	ECI:		Name of Limit	ed Liability Con	npany	
The en	closed	Articles o	f Organization and fee(s) are	submitted for file	ing.	
Please	return	all corresp	condence concerning this matt	er to the followi	ng:	
	Rog	er G. Ha	aigney, Jr.			
				Name of Person		
				Firm/Company		
	167	96 Patio	Village Lane			
		•		Address		
	Wes	ston, FL	33326			
	roge	rhaigne	Cit y@msn.com	y/State and Zip C	ode	
			E-mail address: (to be used t	or future annual r	eport notification)	
For fu	rther ir	oformation	concerning this matter, please	call:		
Roge	er G.	Haigney	y, Jr.	843	516-9741	
		Name	of Person	_at (Area Co	ode & Daytime Tele	phone Number
Encio	sed is	a check fo	or the following amount:			
⊒\$125	.00 Fi	ling Fee	\$130.00 Filing Fee & Certificate of Status	Certified (\$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	Regist Division Clifton 2661 I	/Courier Address ration Section on of Corporation Building Executive Center (passee FL 32301	s

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nar	ne:				
The name of the Li	mited Liability Company is:				
Dorothy's Furnitu	ıre Polish, LLC				
(Mı	ust end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")	_		
ARTICLE II - Ad	ldraes:				
		ncipal office of the Limited Liability	Compa	ınv is	
	F		p		
Principal Office A	Address:	Mailing Address:			
16796 Patio Villa	ige Lane	16796 Patio Village Lane			
Weston, FL 3332	26	Weston, FL 33326	_		
			_		
(The Limited Liability Co		Office, & Registered Agent's Signatered Agent. You must designate an individual or an			
The name and the	Florida street address of the re	egistered agent are:	国路	201	
	Roger G. Haigney, Jr.		CRET	2013 SEP 17	7
	Name		SS	_	
	16796 Patio Village Lane		Mag.	P	
		ress (P.O. Box <u>NOT</u> acceptable)	10.1 71.S	2	_
	Weston, FL 33326	FL		24	
	City, Sta	te, and Zip	مع دید.	+-	

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..

(CONTINUED)

Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing M	Name and Address:
President	Roger G. Haigney, Jr.
TOSIGOTI	16796 Patio Village Lane
	Weston, FL 33326
	·
(Use attachment if necess	
CLE V: Effective date, if o	ther than the date of filing: (OPTIONAL e date must be specific and cannot be more than five business
CLE V: Effective date, if o effective date is listed, the	ther than the date of filing: (OPTIONAL date must be specific and cannot be more than five business of filing.)
CLE V: Effective date, if o effective date is listed, the o or 90 days after the date REQUIRED SIGNATU	ther than the date of filing: (OPTIONAL date must be specific and cannot be more than five business of filing.)
CLE V: Effective date, if o effective date is listed, the o or 90 days after the date REQUIRED SIGNATU Signatur (In accordance we constitutes an affiliam aware that a	ther than the date of filing: (OPTIONAL date must be specific and cannot be more than five business of filing.)
CLE V: Effective date, if o effective date is listed, the o or 90 days after the date REQUIRED SIGNATU Signatur (In accordance with constitutes an affiliam aware that a constitutes a third	ther than the date of filing:
CLE V: Effective date, if o effective date is listed, the o or 90 days after the date REQUIRED SIGNATU Signatur (In accordance with constitutes an affiliam aware that a constitutes a third	ther than the date of filing:
CLE V: Effective date, if o effective date is listed, the o or 90 days after the date REQUIRED SIGNATU Signatur (In accordance with constitutes an affiliam aware that a constitutes a third	ther than the date of filing:

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

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