# L 13000132545

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
|   |  |  |  |  |
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|   |  |  |  |  |
| Office Use Only                         |  |  |  |  |



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(850) 245-6051.

# **COVER LETTER**

**Registration Section** TO: **Division of Corporations** 

SUBJECT: Knight and Day Fashion 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:

ynne Knight Brandy LLC Day Fashion Knight and Rosalind Ave 3590 Sou Florida 32 City/State and Zip Code Orlando ashim LLC @gmail. Cem \_Koightandda

For further information concerning this matter, please call:

at (<u>407</u>) <u>255</u>0361 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

T\$125.00 Filing Fee X\$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/Courler 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:**

7

The name of the Limited Liability Company is:

Knight and Day Fashion LLC. (Must end with the words "Limited Eiability 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:

3590 South Rosalind Ave orlando, FC 32806

3590 South Rosalind Ave orlando, FL 32806

## 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:



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.

RFD)

(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>

••

### Name and Address:

"MGR" = Manager "MGRM" = Managing Member

> Brandy 3590 Sou

| 3690  | South  | Rosalin                 | d Ave |
|-------|--------|-------------------------|-------|
| Orlan | do, FC | $\frac{Rosalin}{32806}$ |       |
|       |        |                         |       |

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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. 8 (In accordance with section 608.408(3), Florida Statutes, the execution of this document m constitutes an affirmation under the penalties of perjury that the facts stated herein are true  $\gamma =$ Ŗ  $\bigcirc$ I am aware that any false information submitted in a document to the Department of State õ constitutes a third degree felony as provided for in s.817.155, F.S.) ed or printed name of signee

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
S 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)

Page 2 of 2

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