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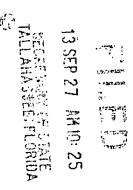
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(Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to F	iling Officer:	

Office Use Only



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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mama's Little Red Store, 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:

Marilyn Trest Elliott		
	Name of Person	-
	Firm/Company	_
3241 NE Hwy 349		
	Address	_
Old Town, FL 32680)	
City	y/State and Zip Code	
E-mail address: (to be used for	for future annual report notification)	A
For further information concerning this matter, please	e call:	स्था स्था इ
Marilyn Trest Elliott	_at (352) 542-2741	gran gran
Name of Person	Area Code & Daytime Telephone Number	2.50
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\text{Certificate of Status}\$	□\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Mama's Little Red Store LLC		
(Must end with the words "Limi	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address o	of the principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
1492 SW HWY 351	3241 NE Hwy 349	
(The Limited Liability Company cannot serve as its or		
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered Agent's wn Registered Agent. You must designate an individ	dual or another
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	gistered Office, & Registered Agent's wn Registered Agent. You must designate an individual of the registered agent are:	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered Agent's wn Registered Agent. You must designate an individ	dual or another
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered Agent's wn Registered Agent. You must designate an individual of the registered agent are:	dual or another
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address Marilyn Trest Elliott 3241 NE Hwy 349	gistered Office, & Registered Agent's wn Registered Agent. You must designate an individual of the registered agent are:	dual or another 13 SEP 27
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address Marilyn Trest Elliott 3241 NE Hwy 349	gistered Office, & Registered Agent's wn Registered Agent. You must designate an individual of the registered agent are: Name Street address (P.O. Box NOT acceptable)	dual or another 13 SEP 27

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

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mo	Name and Address:
MGR	Marilyn Trest Elliott
MOR	3241 NE Hwy 349
	Old Town, FL 32680
MGRM	Victor D. Benson
	3241 NE Hwy 349
	Old Town, FL 32680
(Use attachment if necess	ary)
ICLE V: Effective date, if one of the control of th	ther than the date of filing: e date must be specific and cannot be more than five business day of filing.)
REQUIRED SIGNATU	RE:
V Y Signatur	re of a member or an authorized representative of a member.
(In accordance w constitutes an affi	ith section 608.408(3), Florida Statutes, the execution of this document irmation under the penalties of perjury that the facts stated herein are true. ny false information submitted in a document to the Department of State

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

Marilyn Trest Elliott

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee

constitutes a third degree felony as provided for in s.817.155, F.S.)