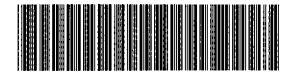
U3000172014

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nai	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



900253947519

12/11/13---01025---006 **160.00

EFFECTIVE DATE 12-13-13

TALLATAS SECTIONS

:::(で) () ()

B. BOSTICK

DEC 1 2 2013

EXAMINER

COVER LETTER .

TO: Registration Section Division of Corporations
SUBJECT: Aimee's Creative Catering, 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:
Betsy A. Jimenez Name of Person
Aimee's Creative Catering, LLC
8983 Okeechobee Blud Suite 202-182
Address
West Palm Beach, FL 33411
City/State and Zip Code betsy imenez 7310 qmail. Com E-mail address: (to be used foculture annual report notification)
E-mail address: (to be used for ture annual report notification)
For further information concerning this matter, please call:
Bets Jimenez at 201 241-2694 The Name of Person Area Code & Daytime Telephone Number 2
Name of reison Area Code & Daytine Telephone Number 5
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee 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

SARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:	
Aimee's Creative Cate (Must end with the words "Limited Liability	ring "LLC"
(Muss end with the words Chinica Liabilit	y Company, 15,15C., or 151C.
ARTICLE II - Address: The mailing address and street address of the printing.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8711 S. San Andros West Palm Beach, Fr. 33411	8983 OKERCHODER BIND Suite #202-182 West Agm Beach, FL 33411
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
Betsy A.	Simenez
	ess (P.O. Box NOT acceptable)
West Palm Bach City, State	
liability company at the place designated in the registered agent and agree to act in this capacital statutes relating to the proper and complete	scept service of process for the above stated limited als certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of a performance of my duties, and I am familiar with asstered agent as provided for in Chapter 608, F.S.

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
President	Betsy Jimenez 8983 bleechobee Blud Suite 202-182 West Palm Beach, Fr 33411
M anager	Clarissa Jimenez 8711 S. San Andros West Parm Beaun, Fl. 33411
Managiny Member	Yanire Jimenez 8711 S. San Andrus West Palm Beach, R. 33411

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: $\frac{12-13-13}{2}$. (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 of 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.)

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 5.00 Certificate of Status (Optional)