L14000016604

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Orty/State/Zip/Friting #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200256029372

01/27/14--01026--010 **125.00

FILLED
2014 JAN 27 MIN: 29

COVER LETTER

	ration Section on of Corporations			
SUBJECT:	PageantSmart, l	LC		
SUBJECT			ity Company	
The enclosed A	rticles of Organization and fee(s)	are submitted	for filing.	
Please return all	correspondence concerning this r	natter to the	following:	
Jo	orge Esteban			
		Name of	Person	
P	ageantSmart			
		Firm/Co	mpany	
10	612 Ferdinand S	St		
<u></u>		Addr	ress	
С	oral Gables, Flo	orida 3	33134	
		City/State an	d Zip Code	
pa	geantsmart@yahoo.c		or future annual repor	t notification)
For further info	mation concerning this matter, plo			·,
_	Esteban	786	558-597	6
1	Name of Person	Area Code	Daytime Teleph	one Number
Enclosed is a ch	Fee \$130.00 Filing Fee & Certificate of Status	Certif	00 Filing Fee & ied Copy al 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/Courier Addi Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

pany is:
· · · · · · · · · · · · · · · · · · ·
gnate an individual or
130
C.

हिता
,
20

Page 1 of 2

(CONTINUED)

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Jorge Esteban
	1612 Ferdinand St
	Coral Gables, FL 33134
MGR	Rick Diehl Esteban
	1612 Ferdinand St
	Coral Gables, FL 33134
(Use attachment if necessary)	
·	
E V: Effective date, if other than the date	of filing: (OPTIONAL)
E V: Effective date, if other than the date ective date is listed, the date must be sp	
E V: Effective date, if other than the date ective date is listed, the date must be spe	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the date ective date is listed, the date must be sporf filling.)	
EV: Effective date, if other than the date ective date is listed, the date must be spor filing.)	
EV: Effective date, if other than the date ective date is listed, the date must be sporf filling.)	
E V: Effective date, if other than the date ective date is listed, the date must be sport filing.)	
ective date is listed, the date must be sport filing.) E VI: Other provisions, if any.	
E V: Effective date, if other than the date ective date is listed, the date must be sport filing.)	
E V: Effective date, if other than the date ective date is listed, the date must be spor filing.) E VI: Other provisions, if any.	
EV: Effective date, if other than the date ective date is listed, the date must be sport filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date ective date is listed, the date must be spoof filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a ne	ecific and cannot be more than five business days prior to or 90 Mulau ember or an authorized representative of a member.
LE V: Effective date, if other than the date lective date is listed, the date must be spoof filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE. Signature of a ne (In accordance with section)	ecific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date lective date is listed, the date must be spoof filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE. Signature of a nee (In accordance with section constitutes an affirmation u I am aware that any false in	exific and cannot be more than five business days prior to or 90 Multiple and cannot be more than five business days prior to or 90 ember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
EV: Effective date, if other than the date fective date is listed, the date must be spoof filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE. Signature of a nee (In accordance with section constitutes an affirmation u I am aware that any false in constitutes a third degree fee	ecific and cannot be more than five business days prior to or 90 member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State ellony as provided for in s.817.155, F.S.)
E V: Effective date, if other than the date ective date is listed, the date must be spoof filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE. Signature of a nee (In accordance with section constitutes an affirmation u I am aware that any false in constitutes a third degree fee	exific and cannot be more than five business days prior to or 90 medical prior and authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document not the penalties of perjury that the facts stated herein are true. 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)
\$ 5.00 Certificate of Status (Optional)