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T. BROWN

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Mini Garden Market 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:
Maria Folsom Name of Person
Mini Garden Market, LLC Firm/Company
2357 Braeburn Cir Address
Tallahassee, FL 32309  City/State and Zip Code  Mariafolsom 6773 @ 9mail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Maria Folsom at (850) 339 - 9393  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$\forall \text{\$125.00 Filing Fee}  \$\subseteq \$\sub
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLE I - Name: The name of the Limited Liability Company is:
Mini Garden Market, LLC (Must end with the words "Limited Liability 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:
2357 Braehuin Cir 2357 Braehuin Cir Tallahassee, FL 32309 Tallahassee, FL 32309
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:
Maria Folson Name
2357 Brachurn Cir Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32309

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: 'AMBR" = Authorized Member "MGR" = Manager	Name and Address:
lmbr	Maria Folsom 2357 Braeburn Cir. Tarrahassee, Fr 32309
	(OPTIONAL)
EV: Effective date, if other than the ctive date is listed, the date must filling.)	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days prior to or 9
EV: Effective date, if other than the ctive date is listed, the date must filling.) EVI: Other provisions, if any.	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days prior to or 9
E VI: Other provisions, if any.  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with section constitutes an affirmation I am aware that any false)	e date of filing:
E V: Effective date, if other than the ctive date is listed, the date must filling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with sectionstitutes an affirmation I am aware that any false)	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)