L14000036994

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasmos Emily Marro)
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400256988184

02/21/14--01014--011 **160.00

Effective Date 2/14/14

SECRETARY OF STATE OF CORPORATIONS



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GUILLY GOSSIO L.L.C 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:
Bronddie Campbell Name of Person
Guilty Gossip L.L.C. Firm/Company
3520 N.W. 193 St. Address
Miami Gardens, 71 33056
City/State and Zip Code Branchic Composition of Composition Compo
For further information concerning this matter, please call:
Branchie Campbell at (850) 241-3599 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$\begin{array}{ c c c c c c c c c c c c c c c c c c c

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2014

BRANDDIE CAMPBELL 3520 NW 193RD ST MIAMI GARDENS, FL 33056

SUBJECT: GUILTY GOSSIP L.L.C. Ref. Number: W14000012027

We have received your document for GUILTY GOSSIP L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6951.

JENNA D HARRIS Regulatory Specialist II

Letter Number: 814A00004096

SECRETARY OF STATE
DIVISION OF CORPORATIONS

Effective Date 2/14/14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CIUITA CIDOID C.C.C.	
(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 of	office of the Limited Liability Company is:
rincipal Office Address:	Mailing Address:
3520 N.W. 1935t Miomi Gordens, 71 3205le	3520 N.W. 193 St. Miami Gardins, 71 33054

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:

ARTICLE I - Name:

The name of the Limited Liability Company is:

Guilta Grasin 11 C

Name
4758 PodCli74 C+#2
Florida street address (P.O. Box NOT acceptable)

 $\frac{QU(507VIIR}{City} = \frac{322}{7}$

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..

Rogistered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMRIC	Branchie Compoell 3520 N.W. 193 St.
AMBR	Miami Gardens, 71 33056 Tagucusha Campbell 1723 N.W. 163 St.
AMBR	Shifton Coleman Southside by # 185
	Jacksonville 171 30256
Use attachment if necessary)	
EV: Effective date, if other than the date of inctive date is listed, the date must be specific filing.)	filing: TEBLE 2014 (OPTIONAL) ic and cannot be more than five business days prior to or 90
E VI: Other provisions, if any.	
required signature:	

Filing Fees:

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.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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