43238

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

Office Use Only



200257774242

03/13/14--01017--017 **125.00

TA HAR IS AN 9 45
SECRETARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations		
cupu	ECT: DILLOMA MANAHA		TSE F
SUBJI	ECT: PILLOW MAINIA	mited Liability Company	一一 氣清 雪:
	.vame of En	mice Elabinity Company	المنافق المساريتين
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	経験の
Please	return all correspondence concerning this m	atter to the following:	
	STEVEN GORDON		χ »
		Name of Person	
	PILLOW MAINIA		
		Firm/Company	
	5030 CHAMPION BLVD BUILDING		· · · · · · · · · · · · · · · · · · ·
		Address	
	BOCA RATON, FL 33496		
	C	City/State and Zip Code	
S	TEVE@NATURALSLEEPFD.COM		
	E-mail address: (to be use	d for future annual report notifica	ation)
For fur	ther information concerning this matter, ple	ase call:	
STEV	ZEN GORDON at (561) 504-3444	
<u> VIE</u>	Name of Person		lephone Number
Enclos	ed is a check for the following amount:		
ZI \$125.0	00 Filing Fee \$\Bigcup\$130.00 Filing Fee &	□\$155.00 Filing Fee &	□\$160.00 Filing Fee,
<u>- 1</u>	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy
			(additional copy is enclosed)
	M-85 4 3 J	Church Commission A 11	
	Mailing Address Registration Section	Street/Courier Add Registration Section	ress
	Division of Corporations	Division of Corpora	tions
	P.O. Box 6327	Clifton Building	
	Tallahassee, FL 32314	2661 Executive Cen	ter Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
PILLOW MAINIA, LLC	
	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5030 CHAMPION BLVD BUILDING G-11 SUITE 293 BOCA RATON, FL 33496	5030 CHAMPION BLVD BUILDING G-11 SUITE 293 BOCA RATON, FL 33496
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered ag	gent are:
STEVEN GORDON	
Name	
1482 NW 48TH DRIVE	
Florida street address (P.O. Box N	OT acceptable)
BOCA RATON	FL 33431
City	Zip
the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of	tce of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance ations of my position as registered agent as provided for in 605, F.S
(CONTINUE)	D)
Page 1 of 2	

Page 1 of 2

FILED

14 MAR 13 AM 9 45

SECRETARY OF STATE

<u>e:</u> IBR" = Authorized Member iR" = Manager	Name and Address:
GR" = Manager	
BR	STEVEN GORDON
	1482 NW 48TH DRIVE
	BOCA RATON, FL 33431
······································	
attachment if necessary) Effective date, if other than the date of file date is listed, the date must be specific	ing: 3-11-14 (OPTIONAL) and cannot be more than five business days prior to or
Effective date, if other than the date of fil	ing: <u>3-11-14</u> . (OPTIONAL) and cannot be more than five business days prior to or
Effective date, if other than the date of file date is listed, the date must be specific ng.)	ing: 3-11-14 (OPTIONAL) and cannot be more than five business days prior to or
Effective date, if other than the date of file date is listed, the date must be specific ng.)	ing: 3-11-14 (OPTIONAL) and cannot be more than five business days prior to or
Effective date, if other than the date of file date is listed, the date must be specific ng.) : Other provisions, if any. DUIRED SIGNATURE:	and cannot be more than five business days prior to or
Effective date, if other than the date of file date is listed, the date must be specific ng.) : Other provisions, if any. DUIRED SIGNATURE: Signature of a member (In accordance with section 605.020	and cannot be more than five business days prior to or or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this document
Effective date, if other than the date of file date is listed, the date must be specific ng.) : Other provisions, if any. DUIRED SIGNATURE: Signature of a member (In accordance with section 605.020 constitutes an affirmation under the	or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true.
Effective date, if other than the date of file date is listed, the date must be specific ng.) : Other provisions, if any. DUIRED SIGNATURE: Signature of a member (In accordance with section 605.020 constitutes an affirmation under the	r or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. In submitted in a document to the Department of State
Effective date, if other than the date of file date is listed, the date must be specific ng.) : Other provisions, if any. DUIRED SIGNATURE: Signature of a member (In accordance with section 605.020 constitutes an affirmation under the I am aware that any false informatio constitutes a third degree felony as particular and section of the section o	r or an authorized representative of a member. 33 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. In submitted in a document to the Department of State provided for in s.817.155, F.S.)
Effective date, if other than the date of file date is listed, the date must be specific ng.) : Other provisions, if any. DUIRED SIGNATURE: Signature of a member (In accordance with section 605.020 constitutes an affirmation under the I am aware that any false informatio constitutes a third degree felony as particular and section of the section o	r or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. In submitted in a document to the Department of State

Page 2 of 2