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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>.</u>
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Division of	n Section Corporations		
		t	
SUBJECT: Angels	Dance, LLC		
	Name of Lin	mited Liability Company	
The enclosed Articles	s of Organization and fee(s) a	re submitted for filing.	
Please return all corre	espondence concerning this m	natter to the following:	
Darcie [DeAngelis		
		Name of Person	
Angels I	Dance, LLC		<u> </u>
		Firm/Company	
12117 S	Sandy Run Road		
		Address	
Jupiter,	FL 33478		
	(City/State and Zip Code	
angelsdanceFl		d for future annual report notifica	ation)
	E-man address. (to be use	a for future annual report nourica	uon)
For further information	on concerning this matter, ple	ase call:	
Darcie DeAngelis	at (_		
Na	me of Person	Area Code Daytime Tel	lephone Number
Enclosed is a check f	or the following amount:	,	2014 APR
☐ \$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certificate Copy
		•	(additional copy is enclosed)
Ms	ailing Address	Street/Courier Add	mese 5
	gistration Section	Registration Section	
	vision of Corporations	Division of Corporat	tions
	D. Box 6327	Clifton Building	ton Cirolo
Tal	llahassee, FL 32314	2661 Executive Cent	ier Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limite	ed Liability Company is:				
Angels Dance, LLC.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		•	
()	Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LI	.C.")		
ARTICLE II - Addre The mailing address an		office of the Limited Liability Compar	ny is:		
Principal Office Add	ress:	Mailing Address:			
12117 Sandy Run R Jupiter, FL 33478	oad	12117 Sandy Run Road Jupiter, FL 33478		-	
	W			- -	
(The Limited Liability another business entity		•	ite an indiv	idual o)r
	Darcie DeAngelis				
	Nar	ne	5.0	APR	CONSTRUCTO
	12117 Sandy Run Road		:SS:	0	-
	Florida street address (P.O. B	sox NOT acceptable)	in S	70 3K	
	Jupiter	FL 33478	100	<u>†.</u>	means
	City	Zip	AGIA MINA	643	.(************************************
the place designate capacity. I further a	d in this certificate, I hereby acc gree to comply with the provision am familiar with and accept the c	service of process for the above stated li tept the appointment as registered agent as of all statutes relating to the proper a pobligations of my position as registered a pter 605, F.S	and agree nd complete	to act i e perfo	in this rmance

Page 1 of 2

(CONTINUED)

Title:		Name and Address:	
"AMBR" = Authorized	Member	<u> </u>	
'MGR" = Manager		5 . 5 4	
MGR	_	Darcie DeAngelis	
	•	12117 Sandy Run Road Jupiter, FL 33478	
		Jupiter, FL 33476	
<u></u>	-		
·	_		
	•		
	**	W	
			· · · · · · · · · · · · · · · · · · ·
Use attachment if nece	essary)		
ctive date is listed, the filing.) E VI: Other provisions,	if any.	ing: (OPT and cannot be more than five business days	s prior to or 90
ctive date is listed, the filing.) E VI: Other provisions,	if any.	and cannot be more than five business days	s prior to or 90
ctive date is listed, the filing.) E VI: Other provisions,	if any.	and cannot be more than five business days	s prior to or 90
E VI: Other provisions, E VI: Other provisions, REQUIRED SIGNAT S (In accordance constitutes and I am aware the	if any. FURE: Signature of a member ce with section 605,020 affirmation under the nat any false informatio	and cannot be more than five business days	ber. is document are true.
E VI: Other provisions, E VI: Other provisions, REQUIRED SIGNAT S (In accordance constitutes and I am aware the	if any. FURE: Signature of a member ce with section 605,020 a affirmation under the nat any false informatio third degree felony as p	r or an authorized representative of a memlo3 (1) (b), Florida Statutes, the execution of the penalties of perjury that the facts stated herein an submitted in a document to the Department	ber. is document are true.
E VI: Other provisions, E VI: Other provisions, REOUIRED SIGNAT S (In accordance constitutes at I am aware the constitutes a	if any. FURE: Signature of a member ce with section 605.020 an affirmation under the nat any false informatio third degree felony as parcie Degree Type or Articles of Organizatopy (Optional)	r or an authorized representative of a member of the penalties of perjury that the facts stated hereing no submitted in a document to the Department provided for in s.817.155, F.S.)	ber. his document hare true. of State