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3 VISION OF CORRESPONDED



# **COVER LETTER**

Division of	Corporations		
SUBJECT: LA(	y Luck B Name of Lin	butique by	y Tiffamy 12
The enclosed Articles	s of Organization and fee(s) an	re submitted for filing.	
Please return all corre	espondence concerning this m	atter to the following:	
	Tiffann	L Hadu Name of Person	
		Firm/Company	
100	1 Shady	WOOD Tr	
Ta	TLHAOL	ity/State and Zip Code  Of A God for fiture annual report notified	305.
For further information	on concerning this matter, plea		<b>,</b>
Tiffarm	L Hadyat (	850 345- Area Code Daytime Te	- SID 1 lephone Number
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Ma	iling Address	Street/Courier Add	ress

TO:

Registration Section

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:		
Leidy Luck Bourique by Tiffany, (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.)	<u>t</u> LC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address:  2415 N. Monrue St #248 1001 Shadh Wood Tallahassee, FL 32303 Tallahassee, FL	17r 323L	1 5
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 indivation another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:    The New Name   Plorida street address (P.O. Box NOT acceptable)   Plorida street address		14 IIII - 2 PH 2: 28
Having been named as registered agent and to accept service of process for the above stated limited liabithe place designated in this certificate, I hereby accept the appointment as registered agent and agree capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete of my duties, and I am familiar with and accept the obligations of my position as registered agent as proceedings of the proper and complete the control of the proper and complete the proper and complete the control of the proper and complete the proper an	to act in the e performa	nis ince

Page 1 of 2

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Tiffany L. Havley
talla hisself, FL 33/5
J.F.
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er or an authorized representative of a member.  203 (1) (b), Florida Statutes, the execution of this document e penalties of periury that the facts stated herein are true.
er or an authorized representative of a member.
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