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SECRETARY OF STATE

FILED

2014 JUN 12 PM 3: 35

## **COVER LETTER**

Division of	Corporations		
SUBJECT: <u>EL</u>	ite Floori Name of Lin	nited Liability Company	lies, uc
The enclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please return all corre	espondence concerning this m	atter to the following:	
·	DOW i	FRIESON) Name of Person	
<del></del>	ELTC 7	FILODIZIVE & S	Supple 205
	452	5 CAPITUL CIT	ile W/w I-23
	10/10/	City/State and Zip Code	2303
	E-mail address: (to be use	d for future annual report notifica	ation)
For further information	on concerning this matter, plea	ase call:	
DOW F	ne of Person at (	850 212-2 Area Code Daytime Te	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 Adduses	Street/Courier Add	

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:  ELite French & Supplies LL (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:			
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 another business entity with an active Florida registration.)	l or		
The name and the Florida street address of the registered agent are:  Name  S384 Dhwh Cour  Florida street address (P.O. Box NOT acceptable)  Tblum FLT 32 303  City Zip	SECRETARY OF STATE	2014 JUN 12 PM 3: 35	FILED
Having been named as registered agent and to accept service of process for the above stated limited liability of the place designated in this certificate, I hereby accept the appointment as registered agent and agree to accapacity. I further agree to comply with the provisions of all statutes relating to the proper and complete per of my duties, and I am familiar with and accept the obligations of my position as registered agent as provide Chapter 605, F.S	t in this formanc	e	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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