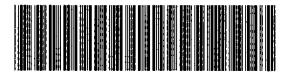
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COVER LETTER

то:	Registration Division of C	Section Corporations	•	
SUBJE	CT: <u>Billi Ga</u>	rtman LLC Name of Lin	nited Liability Company	
The end	losed Articles	of Organization and fee(s) ar	re submitted for filing.	
Please r	eturn all corre	spondence concerning this me	atter to the following:	
	Billi Gart	man		
			Name of Person	
			Firm/Company	
	PO Box	1994	Addings	
		·	Address	
	Holmes F	Beach, Florida, 34218	ity/State and Zip Code	
<u>an</u>	namariaislan	d@hotmail.com E-mail address: (to be used	d for future annual report notifica	ation)
For furt	her informatio	n concerning this matter, plea	ase call:	
<u>Billi Ga</u>		at (<u>S</u>	941) <u>545-8877</u> Area Code Daytime Te	lephone Number
Enclose	d is a check fo	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)

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 Tailahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Mailing Address: Mailing Address: Sat7 Gulf Driva, suite 2 Holmes Beach Florida, 34217 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: Billi Gartman Name 5347 Gulf dr suite 2 Florida street address (P.O. Box NOT acceptable) Holmes Beach FL 34217 City Zip 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. (CONTINUED) Page 1 of 2	ARTICLE I - Name: The name of the Limited Liability Company is:		
(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: Principal Office Address: Mailing Address: Mailing Address: 5347 Gulf Drive, suite 2 Holmes Beach Florida, 34217 Po box 1994 Holmes Beach Florida, 34217 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: Billi Gartman Name 5347 Gulf dr suite 2 Florida street address (P.O. Box NOT acceptable) Holmes Beach Fl. 34217 City Zip 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. Registered Agent's Signature (REQUIRED) Registered Agent's Signature (REQUIRED) Page 1 of 2	Billi Gartman LLC.		
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Holmes Beach Florida, 34217 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: Billi Gartman Name 5347 Gulf dr suite 2 Florida street address (P.O. Box NOT acceptable) Holmes Beach FL 34217 City Zip 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. Registered Agent's Signature (REQUIRED) (CONTINUED) Page I of 2	Principal Office Address:	Mailing Address:	
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Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Billi Gartman 5347 Gulf Dr, suite 2	
	5347 Gulf Dr, suite 2	
	Holmes Beach, Florida, 34217	
		
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