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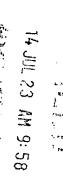
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(Business Entity Name)
(Document Number)
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Paola Martin

11 East Forsyth Street #1605 Jacksonville, FL 32202

(904) 769-3484



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to form a Florida Limited Liability Company pursuant to Chapter 605, Florida Statutes. All information included in the Articles of Organization must be in English and must be typewritten or printed legibly. If this requirement is not met, the document will be returned for correction(s). The Division of Corporations suggests using the sample articles merely as a guideline. Pursuant to s. 605.0201, Florida Statutes, additional information may be contained in the Articles of Organization.

The name of a limited liability company must be distinguishable on the records of the Florida Department of State.

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

NOTE: This form for filing Articles of Organization is basic. Each limited liability company is a separate entity and as such has specific goals, needs, and requirements. A dditionally, the tax consequences arising from the structure of a limited liability company can be significant. The Division of Corporations recommends that all documents be reviewed by your legal counsel. The Division is a filing agency and as such does not render any legal, accounting, or tax advice. The professional advice of your legal counsel to ascertain exact compliance with all statutory requirements is strongly recommended.

Pursuant to s.605.0201, Florida Statutes, the Articles of Organization must set forth the following:

ARTICLE I:

The name of the limited liability company, which must end with the words "Limited Liability Company," or the abbreviation "L.L.C.," or the designation "LLC."

ARTICLE II:

The mailing address and the street address of the principal office of the limited liability company.

ARTICLE III:

The name and Florida street address of the limited liability company's registered agent. The registered agent must sign and state that he/she is familiar with and accepts the obligations of the position.

ARTICLE IV: The name and address of each person authorized to manage and control the Limited Liability Company. Although this information is optional at this time, <u>most financial institutions require this information to be recorded with the Florida Department of State</u> in order to open an account. The Department of Financial Services also requires this information to issue Workers' Compensation.

Use "AMBR" for members who are authorized to manage and control the company. Use "MGR" for managers of manager managed LLCs.

ARTICLE V: If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.

What is an effective date?

You may list an effective date if you would like the limited liability company's existence to become effective on a date other than the date it is filed by this office., The effective date can be up to 5 business days prior to the date of receipt or up to 90 days after the date of receipt.

CR2E047 (12/13)

The entity's first annual report form will be due January 1st of the calendar year following the year of formation. If a limited liability company is created late in the calendar year and it doesn't expect to commence business until on or after January 1st of the upcoming year, it should add an effective date of January 1 for the coming year.

If the effective date is in the next calendar year, it will delay the requirement to file an annual report until the following calendar year. Example: A limited liability company is formed December 1, 2007. if it added an effective date of January 1, 2008, the first annual report would not be due until January 1, 2009. If a 2008 effective was not listed, the first annual report would be due January 1, 2008.

Signature:

Articles of Organization must be executed by an authorized person, and the execution of the document constitutes an affirmation under the penalties of perjury that the facts stated therein are true.

FILING FEES:

- \$ 125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)

A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fees and any optional certificate or copy.

A cover letter containing your name, address and daytime telephone number should be submitted along with the articles of organization and the check. The mailing address and courier address are:

Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 (850) 245-6051 Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
(850) 245-6051

Important Information About the Requirement to File an Annual Report

All Florida Limited Liability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$138.75. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

COVER LETTER

TO: Registration Division of C	Section Corporations		
SUBJECT: LUC	ID CREATIVES L Name of Lin	LC nited Liability Company	
	of Organization and fee(s) ar	-	
_	spondence concerning this ma	·	
		Name of Person	<u> </u>
LUCII	CREATIVES LLC		
		Firm/Company	
11 E	AST FORSYTH S	T #1605	
		Address	
JA	CKSONVILLE FL	32202 ity/State and Zip Code	
MARTIN	PAOLA W VMAIL E-mail address: (to be used		ition)
For further informatio	n concerning this matter, plea	se call:	
Prola MAR Nan	at (at (904 769 3484 Area Code Daytime Tel	ephone 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)
<u>M</u> ai	iling Address	Street/Courier Addi	r <u>ess</u>

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:	
LVCID CREATIVES LLC (Must end with the words "Limited Lia	shility Company "LLC" or "LLC"
ARTICLE II - Address: The mailing address and street address of the principal office	
Principal Office Address:	Mailing Address:
11 EAST FORSYTH ST #1605 JACKSONVILLE, FL 32202	EAST FORSYTH ST #1605 JACKSONVILLE FL 32202
ARTICLE III - Registered Agent, Registered Office, & R (The Limited Liability Company cannot serve as its own Reg another business entity with an active Florida registration.)	
The name and the Florida street address of the registered age	ent are:
PAOLA MARTIN Name	
EAST FORSYTH ST Florida street address (P.O. Box NO	
·	
JACKSONVILLE City	Zip
Having been named as registered agent and to accept service the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of accept my duties, and I am familiar with and accept the obligated Chapter 6. Registered Agent's Signature	e appointment as registered agent and agree to act in this ll statutes relating to the proper and complete performance tions of my position as registered agent as provided for in 605, F.S
(CONTINUED)	
Page 1 of 2	14 JUL 23

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager AMBR	HALEY MCCALL 1230 LECHLADE ST JACKSONVILLE, FL 32205
AMBR	LEAH FARINELLA 1904 THACKER AVE JACKSONVICLE, FL 32207
AMBR	PAOLA MARTIN II ERST FORSYTH ST #1605 JACKSONVILLE TZ 32202
(Use attachment if necessary)	
If an effective date is listed, the date must be sp	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days after
f an effective date is listed, the date must be sp ne date of filing.)	e of filing: (OPTIONAL) becific and cannot be more than five business days prior to or 90 days after
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