L14000131062

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

Office Use Only

EFFECTIVE DATE 08/13/14



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08/20/14--01009--021 **155.00

2011 AUG 20 AM II: 30

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COVER LETTER

	egistration Section vision of Corporations				
SUBJECT	: A Little Silver	Shop, LLC Limited Liability Company			
The enclose	ed Articles of Organization and fee(s) are submitted for filing.			
Please retur	n all correspondence concerning thi	s matter to the following:			
	Dyan	Bernstein Name of Person			
	,	Name of Person			
		Firm/Company			
	4557 /	Artesa Way S	•		
		Address			
	Palm	Beach Gardens, City/State and Zip Code	FL 33418		
				対略	
·-···	dynie.b@n	ne. com used for future annual report notific	45 E	AU	- 8
			auony	AUG 20	-
For further	information concerning this matter,	please call:	m P		
Dyan	Bernstein a	1(561) 568-19	23	AM II: 30	CHI.
,	Name of Person	Area Code Daytime Te	elephone Number	30	
Enclosed is	a check for the following amount:				
] \$ 125.00 Fil	ing Fee \$130.00 Filing Fee & Certificate of Status		☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address Registration Section	Street/Courier Add Registration Section	<u>!ress</u>		

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 1 - Name: The name of the Limited Liability Company is:	
A Little Silver Shop, LLG (Must end with the words "Limited Li	A
(Must end with the words "Limited Li	lability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4557 Artesa Way 5 Palm Beach Gardens, FL 33418	4557 Artesa Way S Palm Beach Crardens, FL, 33418
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered ag	
Dyan Bernst Name	ein
1557 Artesa Way ? Florida street address (P.O. Box N	<u>S</u>
Palm Beach Garder	1SEL 33418
City	Zip
the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obliging	ce of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance ations of my position as registered agent as provided for in 605, F.S

(CONTINUED)

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2011 AUG 20 AN 11: 31

CFFECTIVE DATE 08/13/14

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager Dyan Bernstein = AMBR	4557 Artesa Way S Palm Beach Gardens, FL 33418
(Lice attachment if necessary)	
(Use attachment if necessary) LE V: Effective date, if other than the date of iffective date is listed, the date must be specified of filing.)	filing: <u>August 13, 2014</u> . (OPTIONAL) ic and cannot be more than five business days prior to or
LE V: Effective date, if other than the date of infective date is listed, the date must be specified of filing.)	filing: August 13, 2014 (OPTIONAL) ic and cannot be more than five business days prior to or
LE V: Effective date, if other than the date of iffective date is listed, the date must be specified of filing.)	filing: August 13, 2014 (OPTIONAL) ic and cannot be more than five business days prior to or
CLE V: Effective date, if other than the date of infective date is listed, the date must be specified of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	
CLE V: Effective date, if other than the date of iteffective date is listed, the date must be specific of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb (In accordance with section 605.0) constitutes an affirmation under the	er or an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this document be penalties of perjury that the facts stated herein are true. ion submitted in a document to the Department of State

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)

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