L14000/445/3

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE

SEP 1 6 2014 T. **HAMPTON**

COVER LETTER

Division of Corporations
SUBJECT: The Shira Group, L.L.C Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Janet G. Shira Name of Person
The Shira Group, L.L.C
148 William Street
Edgewater, Florida 32141 City/State and Zip Code jgs 841@gmail.com Dhaif address: (to be used for future annual report notification)
J95841@gmail.com Bhail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tanet Shira at (407) 864-1035 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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 Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Mailing Address:

The Shira Group, L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

The mailing address and street address of the principal office of the Limited Liability Company is:

ARTICLE 1 - Name:

ARTICLE II - Address:

Principal Office Address:

The name of the Limited Liability Company is:

148 William Street Edgewater, Florida 32141	148 William Street Edgewater, Florida 32141
ARTICLE III - Registered Agent, Registered Office, & The Limited Liability Company cannot serve as its own Funother business entity with an active Florida registration	Registered Agent. You must designate an individual or
The name and the Florida street address of the registered a	agent are:
JANET SHI	RA
Name	
148 WILLIAM S	STREET
Florida street address (P.O. Box	NOT acceptable)
EDGEWATER	FL 32141
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions o of my duties, and I am familiar with and accept the obli	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance igations of my position as registered agent as provided for in er 605, F.S

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>l'itle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	T 1 0 0 1
AMBR	Janet G. Shira
	148 William Street
	Edgewater, Florida 32141
	V
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