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SECRETARY OF STATE

COVER LETTER

TO:	Registration Division of C	Section Corporations		
SUBJE	CCT: <u>The Cu</u>	pcakery Bakery, L.L.C. Name of Lin	nited Liability Company	
The en	closed Articles	of Organization and fee(s) ar	re submitted for filing.	
Please	return all corre	spondence concerning this m	atter to the following:	
	Krystal C	. Pereira		
			Name of Person	
	The Cup	cakery Bakery, L.L.C.	Firm/Company	
	859 Lake	eworth Circle	Address	
	<u>Heathrov</u>	y, FL 32746	City/State and Zip Code	
<u>Th</u>	eCupcakeryE	Bakery@aol.com E-mail address: (to be use	d for future annual report notifica	ation)
For fur	ther informatio	n concerning this matter, plea	ase call:	
		ne of Person	407) 914-3551 Area Code Daytime Te	lephone Number
Enclose	ed is a check for	or the following amount:		
□ \$125.0	0 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
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
The Cupcakery Bakery, L.L.C.		
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "	'LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	fice of the Limited Liability Com	pany is:
Principal Office Address:	Mailing Address:	
859 Lakeworth Circle	859 Lakeworth Circle	·
Heathrow, FL 32746	Heathrow, FL 32746	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Fanother business entity with an active Florida registration.) The name and the Florida street address of the registered at	Registered Agent. You must design.)	
Krystal C. Pereira		
Name		
859 Lakeworth Circle		
Florida street address (P.O. Box	NOT acceptable)	
Heathrow	FL 32746	
City	Zip	
Having been named as registered agent and to accept servine place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the oblicable. Chapte Registered Agent's Signature.	the appointment as registered age fall statutes relating to the proper gations of my position as registered for 605, F.S	ent and agree to act in this r and complete performance
Page 1 of 2		FAIR RAIR RAIR RAIR RAIR RAIR RAIR RAIR

itle:	Name and Address:	
AMBR" = Authorized Member	<u></u>	
MGR" = Manager		
MBR/MGR	Krystal C. Pereira	
	859 Lakeworth Circle	
	Heathrow, FL 32746	
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