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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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EFFECTIVE DATE

FILED
MIGOT-6 PH 3: 41

K. SALY EXAMINER OCT 13 2014

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: 10 BAGS, L.L.C. Name of Li	mited Liability Company	
	closed Articles of Organization and fee(s) a	_	
Please	return all correspondence concerning this n	natter to the following:	
	Gicela Sanchez	Name of Person	
	10 BAGS, L.L.C.	Firm/Company	
	5875 NW 75th Way	Address	
	Parkland, FL 33066 SANCH 65 @ GMA1L. E-mail address: (to be use	City/State and Zip Code CoM ed for future annual report notifica	ation)
For fur	ther information concerning this matter, ple		
Gicela	Name of Person at (954) 989-0150 Area Code Daytime Te	lephone Number
\$125. 0	ed is a check for the following amount: 10 Filing Fee	☑\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Malling Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3236	tions

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	10-1-2014
10 BAGS, L.L.C.	·
(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 of	ffice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5875 NW 75th Way Parkland, FL 33066	5875 NW 75th Way Parkland, FL 33066
Tarkiano, y E 33300	Tarmand, TE 33000
another business entity with an active Florida registration. The name and the Florida street address of the registered Gicela Sanchez Name	agent are:
5875 NW 75th Way	Size of it
Florida street address (P.O. Box	NOT acceptable)
Parkland	FL 33066
City	Zip Zip
the 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 und accept the oblichapt	rvice of process for the above stated limited liability company at a the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance ligations of my position as registered agent as provided for in the 605, F.S

(CONTINUED)

Page 1 of 2

<u>litle:</u>	Name and Address:
AMBR" = Authorized Member MGR" = Manager	
Manager	Gicela Sanchez
	5875 NW 75th Way
	Parkland, FL 33066
LURO	John P. D'Weill, Jan
	1201 J. Line Toland Rd.
	Dantation, EL. 33388
	
	
Jse attachment if necessary)	
tive date is listed, the date must be	ate of filing: October 1, 2014 (OPTIONAL) specific and cannot be more than five business days prior to or
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