L14006163531

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

Office Use Only



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SECRETARY OF STAIL

J. Shivers OCT 2 1 2814

COVER LETTER ----

Division of Corp			
SUBJECT: Beloved Bo	outique LLC	nited Liability Company	
	Name of Lin	inted Liability Company	
The enclosed Articles of C	Organization and fee(s) ar	re submitted for filing.	
Please return all correspon	ndence concerning this ma	atter to the following:	
Jessica Adai	ir		
	······································	Name of Person	
.			
Beloved Bou	itique	Firm/Company	·
		Tim/Company	
3501 rivervie	ew blvd		
		Address	·
bradenton, F			
	C	ity/State and Zip Code	
shopmybelovedbou	tique@gmail.com	d for future annual report notific	ation
E	-man address. (to be used	a for future annual report notifica	ation)
For further information co	ncerning this matter, plea	ase call:	
Jessica Adair	f Person	941) 705-4493 T	, ·
Name o	I rerson	Area Code Daytime Te	lephone Number
Enclosed is a check for the	e following amount:		
	_	Date of Pill P. A.	□ 6 120 00 PW = P
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	☐\$160.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy
			(additional copy is enclosed)
25 111	4.33	0	
	Address tion Section	Street/Courier Add Registration Section	ress
	of Corporations	Division of Corpora	tions
P.O. Bo	x 6327	Clifton Building	
Tallahas	ssee, FL 32314	2661 Executive Cen	ter Circle

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:		
The name of the Limited Liability Company is.		
Beloved Boutique LLC		
(Must end with the words "Li	imited Liability Company, "L.L.C.," or "	'LLC.")
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limíted Liability Com	pany is:
Principal Office Address:	Mailing Address:	
3501 riverview blvd	3501 riverview blvd	
bradenton, Fl 34205	Bradenton, FI 34205	
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as it another business entity with an active Florida register.) The name and the Florida street address of the register.	s own Registered Agent. You must desig stration.)	
The name and the Florida street address of the regi	sicicu ageni aic.	
Jessica Adair	Name	
2504 Diversion blod		
3501 Riverview blvd Florida street address (P.G	O. Box NOT acceptable)	
bradenton	FL 34205	
City	Zip	
	accept the appointment as registered age isions of all statutes relating to the proper the obligations of my position as registered Chapter 605, F.S Adula Signature (REQUIRED)	ent and agree to act in this r and complete performance
(CON	TINUED)	AS STATE
Pas	ge Fof 2	O 75 - " mm

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
Owner	Jessica Adair
	3501 riverview blvd
	bradenton, fl 34205
· · · · · · · · · · · · · · · · · · ·	
	
(Use attachment if necessary)	
ctive date is listed, the date must be specif	filing: 10/8/2014 (OPTIONAL) fic and cannot be more than five business days prior to or 9
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