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(Requestor's Name)	
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PICK-UP WAIT	] MAIL
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 15, 2014

GEORGINA C. DUTCHER 1702 SKLAR COURT VENICE, FL 34293

SUBJECT: JEAN'S ECLECTIC FIBER ARTS & ORGANICS LLC

Ref. Number: W14000074418

We have received your document for JEAN'S ECLECTIC FIBER ARTS & ORGANICS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 714A00026414

# **COVER LETTER**

Division of Corporations	
SUBJECT: Jean's Eclectic Fiber Arts & Organics Name of Limited Liability Company	LL
,	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Georgina C. Dutcher Name of Person	
Name of Person	
Firm/Company	
1702 Sklar Court	
Address	
Venice, FL 34293 City/State and Zip Code	
twinblue x2 @ comcast. net  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Georgina C. Dutcher at (609) 437-1984 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee  S130.00 Filing Fee & Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	
Mailing Address Street/Courier Address	

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 I - Name:** 

The name of the Limited Liability Company is:

Jean's Eclectic Fiber Arts & Organics LLC (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 office of the Limited Liability Company is:
Principal Office Address:  Ceorgina C. Dutcher 1702 SKlar Ct 1702 SKlar Ct Venice, FL 34293
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
Georgina C. Dutcher Name
Florida street address (P.O. Box NOT acceptable)
Venice FL 34293
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

The name and address of			
Title:  "AMBR" = Authorized  "MGR" = Manager  MG-T	Member -	Name and Address:  Georgina C 1702 Skiar C Venice Fi	1. Dutcher 34293
(Use attachment if nece	• .	January 1,20	
ARTICLE V: Effective date, if of			(OPTIONAL)
n an enective date is listed, the he date of filing.)	date must be specific i	and cannot be more than five busine	ss days prior to or 90 days afte
he date of filing.)		and cannot be more than five Busine	ess days prior to or 90 days afte
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REQUIRED SIGNAT  (In accordance constitutes an I am aware the	if any.  URE:  Ignature of a member with section 605.0203 affirmation under the p at any false information third degree felony as po	or an authorized representative of 3 (1) (b), Florida Statutes, the execution representative of perjury that the facts stated a submitted in a document to the Department of t	a member. on of this document d herein are true.