

U5000075957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

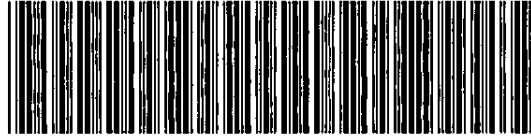
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/23/15--01004--003 **125.00

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2015 APR 23 P 1:58

CLERK OF STATE
TALLAHASSEE, FLORIDA

T SCHROEDER
4/30/15

Francesca Villardi

10301 mango Court

Pembroke Pines Fl 33026

954 600 0426

Perfectlyorganizedbyfrancesca@gmail.com

Hello,

I Francesca Villardi-Tillem, have no intention of reinstating document number L13000034502 and want to release the ~~name~~ of Perfectly Organized by Francesca to myself.

Thank you,

Francesca Villardi

A handwritten signature in black ink, consisting of a large, stylized 'F' followed by a horizontal line.

4/13/2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Perfectly organized by Francesca
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:

Francesca Villardi

Name of Person

Perfectly organized by Francesca

Firm/Company

~~10503~~ 10301 mango court

Address

Pembroke Pines FL 33026

City/State and Zip Code

Perfectly organized by Francesca@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Francesca Villardi at 954 600 0426

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 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:

Perfectly organized by Francesca 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:

10301 mango court
P. Pineda FL 33026

Mailing Address:

10301 mango court
P. Pineda FL 33026

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.)

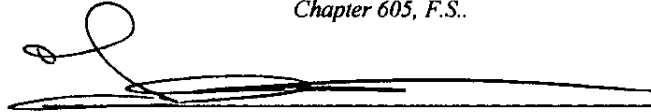
The name and the Florida street address of the registered agent are:

Francesca Villardi
Name

10301 mango court
Florida street address (P.O. Box **NOT** acceptable)

P. Pineda FL 33026
City Zip

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)

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TALLAHASSEE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

"mgr"

Name and Address:

Francesca Villardi
10381 mango court
D. pros FL 33026

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Francesca Villardi

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA