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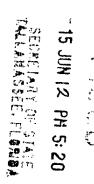
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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Office Use Only



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JUN 1 5 2015 S. GILBERT

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: The Diamond DUST BOUTIQUE, LLC
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:

Evika Rajecki
Name of Person
The Siamond Dust Boutique LLC
Firm/Company
118 Turnbury Park Dr 11305
Address
Savasota, FC
erika athediamonadust boutique. com
E-mail address: (to be used for future annual report position)

For further information concerning this matter, please call:

EVILARAJECKI at (941), 228 - 6129

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 (add/tional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street 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:	them the state of
The name of the Limited Liability Company is:	15 JUN 12 PM 5: 20
The Siamona Sust Boutique, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC	SECRETARY OF STATE

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
19118 Turnbury Park Dr	4118 Turnbury Park Dr
Sarasota, FL 34243	Savasota, FL 34243
III - Registered Agent, Registered Office, & Registe	red Agent's Signature:

ARTICLE

(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:

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
	
ective date is listed, the date must b of filing.)	date of filing: 000 5, 2015 (OPTIONAL) e specific and cannot be more than five business days prior to or 90 d not meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the ective date is listed, the date must be of filing.)	e specific and cannot be more than five business days prior to or 90 d not meet the applicable statutory filing requirements, this date will not b
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