## LI5000161398

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nam	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



500276343985

09/14/15---01006---001 \*\*139.00

SECRETARY OF STATE

	Title: "AMBR" = Authorized Memb "MGR" = Manager MGR	Member	Name and Address:	
			Stephanie Lepine	
		_	100 Paradise Harbour Blvd. #210 North Palm Beach, FL 33408	
	(Use attachment if neces	ssary)		
lf an eff he date ( <u>Note:</u> If	EV: Effective date, if of ective date is listed, the of filing.) The date inserted in this	ther than the date of filing:  date must be specific and  block does not meet the a	. (OPTIONAL) d cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as	
If an eff he date Note: If he docu	EV: Effective date, if of ective date is listed, the of filing.) The date inserted in this	ther than the date of filing: date must be specific and block does not meet the a the Department of State's	d cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as	
If an eff he date Note: If he docu	EV: Effective date, if of ective date is listed, the of filing.) The date inserted in this ment's effective date on	ther than the date of filing: date must be specific and block does not meet the a the Department of State's	d cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as	
If an eff he date Note: If he docu	EV: Effective date, if of ective date is listed, the of filing.)  The date inserted in this ment's effective date on EVI: Other provisions, in the equilibrium of the experiment of the experime	ther than the date of filing: date must be specific and block does not meet the a the Department of State's f any.	d cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as a records.	
If an eff he date <u>Note:</u> If he docu	EV: Effective date, if of ective date is listed, the of filing.)  The date inserted in this ment's effective date on EVI: Other provisions, in the equilibrium of the experiment of the experime	ther than the date of filing: date must be specific and block does not meet the a the Department of State's f any.	d cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as a records.	
If an eff ne date Note: If he docu	EV: Effective date, if of ective date is listed, the of filing.)  The date inserted in this ment's effective date on the effective date of the effective d	ther than the date of filing: date must be specific and block does not meet the a the Department of State's f any.  URE:  Stephanie gnature of a member or cument is executed in acc are that any false informa	d cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as	
f an eff ne date Note: If he docu	EV: Effective date, if of ective date is listed, the of filing.) The date inserted in this ment's effective date on EVI: Other provisions, in the entire of	ther than the date of filing: date must be specific and block does not meet the a the Department of State's f any.  URE:  Stephanie gnature of a member or cument is executed in acc are that any false informa	an authorized representative of a member.  cordance with section 605.0203 (1) (b), Florida Statutes.  tion submitted in a document to the Department of State	

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)