## L15000170378

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
	<b>—</b>	<b>—</b>
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJE	Aly Peterson Design, LLC		
SUBJE		f Limited Liabili	ity Company
The enc	losed Articles of Organization and fee(	s) are submitted	for filing.
Please r	eturn all correspondence concerning thi	is matter to the f	ollowing:
	Aly Peterson		
		Name of	Person
	Aly Peterson Design, LLC		
		Firm/Co	mpany
	5140 West San Jose St.		
		Addre	ess
	Tampa, FL 33629		
	alypeterson@yahoo.com	City/State and	d Zip Code
	E-mail address: (to be	used for future a	nnual report notification)
For furthe	r information concerning this matter, p	lease call:	
	Aly Peterson	813	476-3381
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	l is a check for the following amount:		
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certifie	O Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	]   	Street Address  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Aly Peterson Des				
(Must e	nd with the words "Limited	Liability Company	, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stree	et address of the principal of	ffice of the Limited	Liability Company is:	
<u>Princ</u>	cipal Office Address:		Mailing Address:	
5140 West San Jo		5140	West San Jose St.	
Tampa, FL 33629  ARTICLE III - Registered A The Limited Liability Compa	Agent, Registered Office, any cannot serve as its own	& Registered Agent. N	pa, FL 33629  t's Signature: /ou must designate an individual	or
ARTICLE III - Registered A The Limited Liability Compa nother business entity with a	Agent, Registered Office, on cannot serve as its own on active Florida registration	& Registered Agen Registered Agent. \n.)	t's Signature:	lor
RTICLE III - Registered And The Limited Liability Companother business entity with a	Agent, Registered Office, on cannot serve as its own on active Florida registration	& Registered Agen Registered Agent. \n.)	t's Signature:	lor
RTICLE III - Registered And The Limited Liability Companother business entity with a	Agent, Registered Office, on cannot serve as its own on active Florida registration et address of the registered	& Registered Agen Registered Agent. \n.)	t's Signature:	lor :51
ARTICLE III - Registered A The Limited Liability Compa nother business entity with a	Agent, Registered Office, on cannot serve as its own on active Florida registration et address of the registered	& Registered Agent. Name	t's Signature:	15 OCT
ARTICLE III - Registered A The Limited Liability Compa nother business entity with a	Agent, Registered Office, on any cannot serve as its own an active Florida registration set address of the registered  Aly Peterson	& Registered Agent Negistered Agent No.) agent are: Name	t's Signature: /ou must designate an individual	15 OCT
ARTICLE III - Registered A	Agent, Registered Office, on any cannot serve as its own an active Florida registration et address of the registered  Aly Peterson  5140 West San Jose S	& Registered Agent Negistered Agent No.) agent are: Name	t's Signature: /ou must designate an individual	15 OCT -1 PH12:

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

<u>Fitle:</u> "AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	Also Determine
MGR	Aly Peterson 5140 West San Jose St.
	Tampa, FL 33629
<del></del>	
•	
Use attachment if necessary)	
ctive date is listed, the date must be s	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90
V: Effective date, if other than the date tive date is listed, the date must be so filing.)  the date inserted in this block does not	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
V: Effective date, if other than the date tive date is listed, the date must be so filling.) the date inserted in this block does not ent's effective date on the Department.	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
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