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| (Re | questor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) |) |
| Certified Copies | _ Certificate: | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| | gistration Section vision of Corporations | • |
|----------------|---|---|
| SUBJECT: | Courtney Lauren Interiors LLC | |
| | | Limited Liability Company |
| The enclose | ed Articles of Organization and fee(s | are submitted for filing. |
| Please retur | n all correspondence concerning this | matter to the following: |
| | Courtney Rodriguez | |
| | | Name of Person |
| | | |
| | | Firm/Company |
| | 60 SW 13th Street, #2816 | |
| | | Address |
| | Miami, Florida 33130 | |
| | | City/State and Zip Code |
| _ | courtneylaureninteriors@gmail.com | sed for future annual report notification) |
| For further in | formation concerning this matter, pl | • |
| | Courtney Rodriguez | 305 968-8776 |
| - | at Name of Person | |
| | | , |
| Enclosed is | a check for the following amount: | |
| \$125.00 Fil | ling Fee \$\frac{1}{\times 130.00 Filing Fee \$\frac{3}{2}}\$ Certificate of Status | \$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Address | Street Address |
| | New Filing Section Division of Corporations | New Filing Section Division of Corporations |
| | P.O. Box 6327 | Clifton Building 2661 Executive Center Circle |
| | Tallahassee, FL 32314 | 2001 Executive Center Circle |

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIARILITY COMPANY

| ARTICLES OF ORGANIZATION FOR FLOR | ada Elvii Ed Elabieli I Colvii A. (1 |
|---|---|
| ARTICLE I - Name: | |
| The name of the Limited Liability Company is: | |
| | |
| Courtney Lauren Interiors LLC | |
| (Must end with the words "Limited Liab | pility Company, "L.L.C.," or "LLC.") |
| ADTICLE II. Address. | |
| ARTICLE II - Address: | |
| The mailing address and street address of the principal office | of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 60 SW 13th Street, #2816 | 60 SW 13th Street, #2816 |
| Miami, Florida 33130 | Miami, Florida 33130 |
| | |
| ADDICE THE DOLL AND ADDICE TO A DECEMBER OF THE PARTY OF | |
| ARTICLE III - Registered Agent, Registered Office, & Re | |
| (The Limited Liability Company cannot serve as its own Regi | stered 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 ager | nt are: |
| The name and the Fronta street address of the registered ager | it aic. |
| | |

Courtney Rodriguez

Name

60 SW 13th Street, #2816

Florida street address (P.O. Box NOT acceptable)

33130 Miami Florida City State 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)

Page 1 of 2

| <u>l'itle:</u> 'AMBR" = Authorized Member | Name and Address: |
|---|---|
| 'MGR" = Manager | |
| AMBR / MGR | Courtney Rodriguez |
| | 60 SW 13th Street, #2816 Miami, Florida 33130 |
| | Miami, Fiorida 33130 |
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| EV: Effective date, if other than the date | ate of filing: |
| ctive date is listed, the date must be filing.) | specific and cannot be more than five business days prior to or 90 days t meet the applicable statutory filing requirements, this date will not be |
| EV: Effective date, if other than the dactive date is listed, the date must be filing.) the date inserted in this block does not nent's effective date on the Departme | specific and cannot be more than five business days prior to or 90 days t meet the applicable statutory filing requirements, this date will not be |
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| EV: Effective date, if other than the dective date is listed, the date must be filing.) the date inserted in this block does not nent's effective date on the Departme EVI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a This document is exe I am aware that any faconstitutes a third deg | t meet the applicable statutory filing requirements, this date will not be not of State's records. member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes. lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S. |
| E V: Effective date, if other than the dective date is listed, the date must be filling.) the date inserted in this block does not ment's effective date on the Department's effective date of | t meet the applicable statutory filing requirements, this date will not be not of State's records. member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes. lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S. |