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(Req	uestor's Name)	
(Add	ress)	
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(City)	/State/Zip/Phone	· · · · · · · · · · · · · · · · · · ·
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
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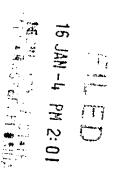
Office Use Only



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JAN 22 2016 S. GILBERT



COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	LunaBlue LLC	
SUDJE		Limited Liability Company
The enc	closed Articles of Organization and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning thi	s matter to the following:
	Michelle Pudlak	
		Name of Person
		Firm/Company
	744 32nd Ave N	
		Address
	Saint Petersburg, FL 33704	
	mlpudlak@yahoo.com	City/State and Zip Code
	E-mail address: (to be	used for future annual report notification)
For furthe	er information concerning this matter, p	dease call:
	Michelle Pudlak	727 656-3129
	Name of Person	Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:	
]\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	
	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

	EFFECTIVE DATE
ARTICLES OF ORGANIZATION FOR FLORIDA L	IMITED LIABILITY COMPANY
RTICLE I - Name: the name of the Limited Liability Company is:	FILED
LunaBlue LLC	16 JAN -4 PM 2:01
(Must end with the words "Limited Liability C RTICLE II - Address: the mailing address and street address of the principal office of the	
RTICLE II - Address:	
RTICLE II - Address: The mailing address and street address of the principal office of the	Limited Liability Company is:

another business entity with an active Florida registration.)

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

Michelle Pudlak		
	Name	
744 32nd Ave N		
Florida street address	(P.O. Box NOT ac	cceptable)
Saint Petersburg	FL	33704
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..

Muhelle Pudlak
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Citle:</u>	Name and Address:
	Authorized Member
MGR" = M	
AMBR	Michelle Pudlak 744 32nd Ave N
	Saint Petersburg, FL 33704
	Same reteisourg, PL 55704
	- 4000
	A*********************************
V: Effective date is filing.)	re date, if other than the date of filing: 01-01-2016 . (OPTIONAL) listed, the date must be specific and cannot be more than five business days prior to out ted in this block does not meet the applicable statutory filing requirements, this date will
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ARTICLE IV-

Page 2 of 2