11600031834

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
	WAIT	<u></u>
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000281461990

02/04/16--01009--019 **130.00

16 FB -4 FH 4: 09

2/14/14

COVER LETTER

TO:	Registration Section Division of Corporations		,	4
SUBJE	Amarillo Boutique			
SUBJE		f Limited Liabil	ty Company	
The encl	losed Articles of Organization and fee(s	s) are submitted	for filing.	
Please re	eturn all correspondence concerning thi	s matter to the f	ollowing:	
	Staci Clark			
		Name of	Person	
		Firm/Co		
	1301 Kay Jean Drive	riiii/Co	mpany	
		Addre	PSS	
	Brandon, Florida 33594			
	Clark.Staci@gmail.com	City/State and	l Zip Code	
For furthe	E-mail address: (to be used in the concerning this matter, pl		nnual report notification)	
	Staci Clark	813	2992761	
	Name of Person	Area Code	Daytime Telephone Number	_
	is a check for the following amount: Filing Fee \$\frac{1}{N}\$130.00 Filing Fee &		Filing Fee & \$160.0	0 Filing Fee,
	Certificate of Status		l copy is enclosed) Certifi	cate of Status & ed Copy al 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 Fallahassee, FL 32301	16 FEB -4 P

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

4: 09

ARTICLE I - Name:				FILED
The name of the Limited Lia	bility Company is:			, , , , , , ,
			16 F	EB -4 PH
Amarillo Boutiqu	e LLC		1,000	3 <u>8 (4 8 8 8</u> 84 84 84 8
(Must e	end with the words "Limited	l Liability Company	, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		00 00 10 0	renne o la cal	
The mailing address and stre	et address of the principal o	iffice of the Limited	Liability Company is:	
<u>Prin</u>	Principal Office Address:		Mailing Address:	
1301 Kay Jean D	rive	130	Kay Jean Drive	
Valrico, FL 3359		Valr	ico, FL 33594	
The name and the Florida str	eet address of the registered Staci Clark	i agent are:		
		Name		
	1301 Kay Jean Drive	·		
	Florida street addres	s (P.O. Box NOT a	cceptable)	
	Brandon	FL	33594	
	City	State	Zip	
place designated in this certific further agree to comply with th	rate, \overline{I} hereby accept the app e provisions of all statutes r	ointment as register elating to the prope	e above stated limited liability co ed agent and agree to act in this and complete performance of m as provided for in Chapter 605, l	capacity. I y duties, and I

(CONTINUED)

gistered Agent's Signature (REQUIRED)

Page 1 of 2

	Staci Clark 1301 Kay Jean Drive Valrico, FL 33594	"AMBR" = Authorized Member	and Address:
(Use attachment if necessary) E.V: Effective date, if other than the date of filing: (OPTIONAL) Ethic date is listed, the date must be specific and cannot be more than five business days prior to or 90 dr. filing.) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records. E.VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605 0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Staci Clark Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certificate of Status (Optional) \$5.00 Certificate of Status (Optional)	(Use attachment if necessary) E V: Effective date, if other than the date of filing:		Clark
(Use attachment if necessary) E V: Effective date, if other than the date of filing:	(Use attachment if necessary) EV: Effective date, if other than the date of filing: (OPTIONAL) EV: Effective date, if other than the date of filing: (OPTIONAL) (OPTIONAL		
(Use attachment if necessary) E V: Effective date, if other than the date of filing:	(Use attachment if necessary) E.V: Effective date, if other than the date of filing:	Valric	o, FL 33594
(Use attachment if necessary) E V: Effective date, if other than the date of filing:	(Use attachment if necessary) E.V: Effective date, if other than the date of filing:		
(Use attachment if necessary) E. V: Effective date, if other than the date of filing:	(Use attachment if necessary) E. V: Effective date, if other than the date of filing:		
(Use attachment if necessary) E V: Effective date, if other than the date of filing:	(Use attachment if necessary) E. V: Effective date, if other than the date of filing:	-	
(Use attachment if necessary) E.V: Effective date, if other than the date of filing:	(Use attachment if necessary) E V: Effective date, if other than the date of filing:		
(Use attachment if necessary) E V: Effective date, if other than the date of filing:	(Use attachment if necessary) E.V: Effective date, if other than the date of filing:		
(Use attachment if necessary) E V: Effective date, if other than the date of filing:	(Use attachment if necessary) E.V: Effective date, if other than the date of filing:	·	
(Use attachment if necessary) E V: Effective date, if other than the date of filing:	(Use attachment if necessary) E.V: Effective date, if other than the date of filing:		
E V: Effective date, if other than the date of filing:	E V: Effective date, if other than the date of filing: ctive date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records. E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Staci Clark Typed or printed name of signee Filling Fees: \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$50.00 Certificate of Status (Optional)		
E V: Effective date, if other than the date of filing:	E V: Effective date, if other than the date of filing: ctive date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records. E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Staci Clark Typed or printed name of signee Filling Fees: \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$50.00 Certificate of Status (Optional)	Use attachment if necessary)	
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Staci Clark Typed or printed name of signee Filling Fees: \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certificate of Status (Optional) \$ 5.00 Certificate of Status (Optional)	Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Staci Clark Typed or printed name of signee Filling Fees: \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certificate of Status (Optional) \$5.00 Certificate of Status (Optional)		
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Staci Clark Typed or printed name of signee Filling Fees: \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Staci Clark Typed or printed name of signee 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)		
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Staci Clark Typed or printed name of signee 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) Page 2 of 2	This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Staci Clark Typed or printed name of signee 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)		
Typed or printed name of signee 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) Page 2 of 2	Typed or printed name of signee 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) Page 2 of 2	NM i Wu	1/2
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) Page 2 of 2	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) Page 2 of 2	Signature of a member or an authorise document is executed in accordance I am aware that any false information subjects.	with section 605.0203 (1) (b), Florida Statutes. mitted in a document to the Department of State
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) Page 2 of 2	\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) Page 2 of 2	Signature of a member or an authorise document is executed in accordance I am aware that any false information subjects a third degree felony as provided Staci Clark	with section 605.0203 (1) (b), Florida Statutes, mitted in a document to the Department of State led for in s.817.155, F.S.
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) Page 2 of 2	\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) Page 2 of 2	Signature of a member or an authorise document is executed in accordance I am aware that any false information subjects a third degree felony as provided Staci Clark	with section 605.0203 (1) (b), Florida Statutes, mitted in a document to the Department of State led for in s.817.155, F.S.
\$ 5.00 Certificate of Status (Optional) Page 2 of 2	\$ 5.00 Certificate of Status (Optional) Page 2 of 2	Signature of a member or an authorities document is executed in accordance I am aware that any false information subsconstitutes a third degree felony as provide Staci Clark Typed or printe	with section 605.0203 (1) (b), Florida Statutes. mitted in a document to the Department of State led for in s.817.155, F.S.
Page 2 of 2	Page 2 of 2	Signature of a member or an authorities document is executed in accordance I am aware that any false information subsconstitutes a third degree felony as provide Staci Clark Typed or printe Filing F. \$125.00 Filing Fee for Articles of Organization and Description.	with section 605.0203 (1) (b), Florida Statutes. mitted in a document to the Department of State led for in s.817.155, F.S.
Page 2 of 2	Page 2 of 2	Signature of a member or an authorities document is executed in accordance I am aware that any false information subsconstitutes a third degree felony as provide Staci Clark Typed or printe Filing F. \$125.00 Filing Fee for Articles of Organization and D. \$ 30.00 Certified Copy (Optional)	e with section 605.0203 (1) (b), Florida Statutes. mitted in a document to the Department of State led for in s.817.155, F.S. ed name of signee ees: Designation of Registered Agent
	in the second of	Signature of a member or an authorities document is executed in accordance I am aware that any false information subsconstitutes a third degree felony as provide Staci Clark Typed or printe Filing F. \$125.00 Filing Fee for Articles of Organization and D. \$ 30.00 Certified Copy (Optional)	e with section 605.0203 (1) (b), Florida Statutes, mitted in a document to the Department of State led for in s.817.155, F.S. ed name of signee ges: Designation of Registered Agent
	· · · · ·	Signature of a member or an auth This document is executed in accordance I am aware that any false information sub- constitutes a third degree felony as provid Staci Clark Typed or printe Filing F. \$125.00 Filing Fee for Articles of Organization and D. \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	e with section 605.0203 (1) (b), Florida Statutes, mitted in a document to the Department of State led for in s.817.155, F.S. ed name of signee ges: Designation of Registered Agent
o . Image	the state of the s	Signature of a member or an auth This document is executed in accordance I am aware that any false information sub- constitutes a third degree felony as provid Staci Clark Typed or printe Filing F. \$125.00 Filing Fee for Articles of Organization and D. \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	e with section 605.0203 (1) (b), Florida Statutes. mitted in a document to the Department of State led for in s.817.155, F.S. ed name of signee ges: Designation of Registered Agent