

R. WHITE

original

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Shady Ladiesart LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Linda E Green  
Name of Person

Firm/Company

1602 Highland Dunes Way  
Address

Fernandina Beach, FL 32034  
City/State and Zip Code

lehartgreen@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda E Green at 201, 315-2709 (cell)  
Name of Person Area Code Daytime Telephone Number  
904-310-9537 (home)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$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 **FILED**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

'16 FEB 12 PM 10:18

Shady Ladies Art LLC SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

**Mailing Address:**

432 South 8th St.  
Suite B  
Fernandina Beach, FL 32034

~~1602~~ same

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered 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 agent are:

Linda E Green  
Name  
1602 Highland Dunes Way  
Florida street address (R.O. Box **NOT** acceptable)  
Fernandina Beach, FL 32034  
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..*

Linda E Green  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

MGR

MGR

**Name and Address:**

Susan Ruan  
2328 J Sadler Rd 5B  
Fernandina Beach, FL 32034

Lisa Inglis  
61 Oak Grove Place  
Fernandina Beach, FL 32034

Amy Bakew  
316 D Centre St.  
Fernandina Beach, FL 32034

Mary Becker Libby  
616 Spanish Way East  
Fernandina Beach, FL 32034

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: Feb. 9, 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

The managers reserve the <sup>first</sup> right of refusal to purchase another  
member's portion of the LLC if they exit. ~~and~~ ~~proportionally~~

**REQUIRED SIGNATURE:**

Linda E Green

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.

Linda E Green

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)