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(Address)
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(Document Number)
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TALLAMASSEELT ORIDA

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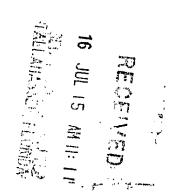
FLORIDA DEPARTMENT OF STATE **Division of Corporations**

June 30, 2016

LAURA M. WISSA 156 CLARKE AVENUE PALM BEACH, FL 33480

SUBJECT: LEAVE IT TO LAURA LLC

Ref. Number: W16000046437



We have received your document for LEAVE IT TO LAURA LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

The document must contain the entity's complete mailing address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Matthew T Moon Regulatory Specialist II

Letter Number: 016A00013871

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LEAVE IT TO LARA 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:
LAURA M. WISSA
Name of Person
LEAVE IT 40 LAURA, UC Firm/Company
156 CLARKE AJENSUE
Address .
Dru Beach FL 33480 City/State and Zip Code
LJOUW DYAHOO, COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	- ~ -			
ART	ICI.	. F. 1	- N2	ame:

The name of the Limited Liability Company is:

(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:
Pau Beach, Jr. 33/80	

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:

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

SECREMARY OF STATE

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	LAURACUSSA
	Park Bendy Er 33880
	·
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fective date is listed, the date must be of filing.) If the date inserted in this block does n	date of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 day ot meet the applicable statutory filing requirements, this date will not be I
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ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: