L1600149089

(Req	juestor's Name)	
(Add	Iress)	
(Add	iicss)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	. Certificates	s of Status
	·	
Special Instructions to F	Filing Officer:	
		•

Office Use Only



400288472224

08/01/16--01027--020 **125.00

15 AIR - | PH 2:31

SECAL PARY OF STATE

COVER LETTER

TO:

TO:	Registration Section Division of Corporations		
SUBJI	ECT: Pretty Things By DeeMo LLC Name of Lin	mited Liability Company	
TI			
	closed Articles of Organization and fee(s) a	_	
riease	return all correspondence concerning this m	natter to the following:	
	Dionne Morales		
		Name of Person	
	Pretty Things By DeeMo LLC		
		Firm/Company	.
	10004 N. 11th St, B		16
	10004 N. 11till St. B	Address	- S
	Tampa, FL 33612	72. 70	
<u>P</u>	rettythinasbydeemo@outlook.com	City/State and Zip Code	FH 2: 3
For fur	ther information concerning this matter, ple	ase call:	
Dionn	e Morales at (at (1813 334-4384 Area Code Daytime Telephone Numbe	r
Enclos	ed is a check for the following amount:		
☑ \$125.0	00 Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of Status}\$	(additional copy is enclosed) Certified C	of Status &
	Mailing Address	Street/Courier Address	
	Registration Section Division of Corporations	Registration Section Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Pretty Things By				
	(Must end with the words "Limi	ited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Ac The mailing addre		al office of the Limited Liability Company is:		
Principal Office	<u>Address:</u>	Mailing Address:		
10004 N. 11th S	it. B	10004 N, 11th St, B		
Tampa, F <u>L</u> 336		Tampa, FL 33612		
	Florida street address of the register Dionne Morales	,	16 AUG - I	SECRETA
	182	attic		
	10004 N. 11th St, B Florida street address (P.O.	Box NOT acceptable)	PH 2:	- (- H)
	Florida street address (P.O. Tampa	FL 33612	개 2: 3 1	F STATE
	Florida street address (P.O.		$\dot{\wp}$	STATE STATE

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u> Fitle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Dionne Morales
	10004 N. 11th St, B
	Tampa, FL 33612
	•
	
EV: Effective date, if other than the da	nte of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 o
E V: Effective date, if other than the dactive date is listed, the date must be sefuling.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 o
E V: Effective date, if other than the date is listed, the date must be sef filing.) E VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 (
EV: Effective date, if other than the date ctive date is listed, the date must be a filling.) EVI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 o
E V: Effective date, if other than the date ctive date is listed, the date must be a filling.) E VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 o
E V: Effective date, if other than the date ctive date is listed, the date must be a filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90 o
E V: Effective date, if other than the date ctive date is listed, the date must be a filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90 o
E V: Effective date, if other than the date ctive date is listed, the date must be a f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a	specific and cannot be more than five business days prior to or 90 of the second secon
E V: Effective date, if other than the date ctive date is listed, the date must be a f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section)	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation un	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the date ctive date is listed, the date must be a f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation un I am aware that any false inf	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document ader the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
E V: Effective date, if other than the date of the date is listed, the date must be soft filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation un I am aware that any false inf	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the date ctive date is listed, the date must be a f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation under that any false information constitutes a third degree fellows.)	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document ader the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
E V: Effective date, if other than the date ctive date is listed, the date must be a f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation un I am aware that any false inf	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
EV: Effective date, if other than the date ctive date is listed, the date must be a filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation under that any false information degree fellows).	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document ader the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
EV: Effective date, if other than the date ctive date is listed, the date must be a filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation under that any false information degree fellows).	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document ader the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.) es Typed or printed name of signee
EV: Effective date, if other than the dactive date is listed, the date must be a filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation under a lam aware that any false information constitutes a third degree felence.	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.) es Typed or printed name of signee
EV: Effective date, if other than the date ctive date is listed, the date must be so f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation under lam aware that any false information constitutes a third degree felence.	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document ider the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.) es Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent

Pretty Things By DeeMo LLC 10004 N. 11th St, B Tampa, FL

INITIAL LIST OF MEMBERS The following named person(s) shall constitute the initial members of Pretty Things By DeeMo

LLC: Dionne Morales

10004 N. 11th St. B Tampa, FL 33612

7.28.11a Date