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COVER LETTER

то:	New Filing Section Division of Corporations		
eun IE	Nire Jewelry		
SORJEC	CT:Nanx	of Limited Liab	ility Company
The encl	osed Articles of Organization and fe	ee(s) are submitte	d for filing.
Please ro	eturn all correspondence concerning	this matter to the	following:
	Erin Manley		
		Name o	of Person
	Nire Jewelry		
		Firm/C	ompany
	3126 W. Oaklyn Avenue		
		Ado	lress
	Tampa, FL. 33609		
	erinpmanley@gmail.com	City/State a	and Zip Code
	E-mail address: (to	oe used for future	annual report notification)
For furthe	er information concerning this matter	r, please call:	
	Erin Manley	813	263-0004
	Name of Person	at (Area Code	Daytime Telephone Number
Enclosed	d is a check for the following amour	nt:	
,	Filing Fee \$130.00 Filing Filing Fee Certificate of Sta	ce & \$155	\$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 266! Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

address of the principal office Address: yenue gent, Registered Office yeannot serve as its on active Florida registra	3120 Tam ce, & Registered Agen wn Registered Agent.	Liability Company is: Mailing Address: 6 W. Oaklyn Avenue pa, FL. 33609	
address of the principal office Address: wenue gent, Registered Office on cannot serve as its o	3120 Tam ce, & Registered Agen wn Registered Agent.	Liability Company is: Mailing Address: 6 W. Oaklyn Avenue pa, FL. 33609 nt's Signature:	
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gent, Registered Officeny cannot serve as its o	ce, & Registered Ager wn Registered Agent.	nt's Signature:	idual or
ny cannot serve as its o	wn Registered Agent.		idual or
Erin Manley	ned agent are: Name		
3126. Oaklyn Ave	nue		
Florida street add	ress (P.O. Box <u>NOT</u> a	cceptable)	
Tampa	Fl.	33609	
City	State	Zip	
te, I hereby accept the a provisions of all statute obligations of my position	appointment as register as relating to the proper on as registered agent o	ed agent and agree to act in the rand complete performance of as provided for in Chapter 60.	his capacity. I If my duties, an
	Erin Manley 3126. Oaklyn Ave Florida street add Tampa City d agent and to accept sete, I hereby accept the approvisions of all statute obligations of my positions.	Name 3126. Oaklyn Avenue Florida street address (P.O. Box NOT a Tampa FL. City State d agent and to accept service of process for the te, I hereby accept the appointment as registere provisions of all statutes relating to the proper obligations of my position as registered agent of the proper obligations of my position as registered agent of the proper obligations of my position as registered agent of the proper obligations of my position as registered agent of the proper obligations.	Name S126. Oaklyn Avenue Florida street address (P.O. Box NOT acceptable) Tampa FL S3609

17 SEP -S ANTERE

ARTICLE IV-

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

Title:		
"AMBR" = Authorized Member		
"MGR" = Manager CEO	Erin Manley	
	3126 W. Oaklyn Avenue	
	Tampa, FL. 33609	
AMBR	Erin Manley	
ANDK	3126 W. Oaklyn Avenue	
	Tampa, FL. 33609	<u> </u>
		
		
		
(Use attachment if necessary)		
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