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SECRETARY OF STATE
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2017

SUSAN SABRANEK 1320-B GREENDALE AVE FORT WALTON BEACH, FL 32547

SUBJECT: FLOWER TEES, LLC Ref. Number: W17000092128

We have received your document for FLOWER TEES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must be signed by a member or an authorized representative of a member.

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

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

Keyna E Page Regulatory Specialist II

Letter Number: 717A00023423

## **COVER LETTER**

TO:	New Filing Section Division of Corporations
CIID IV	FLOWER TEES, LLC
SUBJE	Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please i	return all correspondence concerning this matter to the following:
	Susan Sebranek
	Name of Person
	Flower Tees, LLC
	Firm/Company
	1320-B Greendale Avenue
	Address
	Fort Walton Beach, FL 32547
	City/State and Zip Code
	susanr.sebranek@gmail.com
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	Susan Sebranek 850 368-3347
	Name of Person Area Code Daytime Telephone Number
Fnclose	ed is a check for the following amount:
	O Filing Fee \$\ \text{S130.00 Filing Fee & 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

ARTICLE I - Name: The name of the Limited Liability	Company is:				
	FLC	WER TEES, LLO	<u>.</u>		
(Must contai	n the words "Limited Li	abitity Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street add	lress of the principal off	ice of the Limited	Liability Company is:		
<u>Principal</u>	Office Address:		Mailing Address	:	
1320-B Greendale Ave Fort Walton Beach, FL			-B Greendale Avenue Walton Beach, FL 32547	<u> </u>	
ARTICLE III - Registered Agen (The Limited Liability Company of another business entity with an ac The name and the Florida street ac	annot serve as its own F tive Florida registration idress of the registered a	legistered Agent.  .)	nt's Signature: You must designate an indiv	idual or	
		Name			
	1220.1	B Greendale Aver	uie		
	Florida street address				
	Fort Walton Beach	FL	32547		
	City	State	Zip	<b>#</b>	
Having been named as registered ag place designated in this certificate, l further agree to comply with the pro am familiar with and accept the obli	hereby accept the appoint the statutes religious of all statutes religious of my position as	intment as register ating to the proper s registered agent	ed agent and agree to act in t r and complete performance (	of my dutter and I	FILED

Title:		Name and Address:
	= Authorized Member	t .
"MGR" = 1		
AMBR/M	GR	Susan Sebranek
		1320-B Greendale Avenue
		Fort Walton Beach, FL 32547
	<u>.</u>	
(000	hment if necessary)	
CLEV. EE.	wive data if other than th	ne date of filing:
TICLE V: Effective date	ctive date, if other than the is listed, the date must	be specific and cannot be more than live business days prior to or 70 days are
TICLE V: Effective date late of filing.) e: If the date in	ctive date, if other than the is listed, the date must	s not meet the applicable statutory filing requirements, this date will not be listed
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ICLE V: Effective date at e of filing.)  If the date in locument's effective VI: Other	etive date, if other than the is listed, the date must esserted in this block does ective date on the Departer provisions, if any.  ED SIGNATURE:  Signature of the document is large aware that any awar	s not meet the applicable statutory filing requirements, this date will not be listed truent of State's records.  Althorized representative of a member of the member
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Filing Fees:

ARTICLE IV-