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SECRETARY OF STATE TALLAHASSEE, FLORIOA

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COVER LETTER*

	ew Filing Section vivision of Corporations
SUBJECT	r: French and Fancy LLC Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please retu	arn all correspondence concerning this matter to the following:
	VIRGINIE ALAVERA Name of Person
	Faench and Fancy, LLC Firm/Company
	10881 NE 11th Aug
	Address
	Manu FL 33161 City/State and Zip Code
	City/State and Zip Code
	FRENCHANDFANCY Q GMAIL COM
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Virginia Alaweea at (786) 2913210 Name of Person Area Code Daytime Telephone Number
	is a check for the following amount: Filing Fee \$\frac{130.00}{2}\$ Filing Fee & \$\frac{160.00}{2}\$ Filing Fee & Certificate of Status & 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

Company is:		·
		
tress of the principal office of th	ne Limited Liability Company is:	
Office Address:	Mailing Address:	
11th ave 33161	10881 NE 11th a MIANI EL 33161	<u>ue</u>
cannot serve as its own Registers ctive Florida registration.)	ed Agent. You must designate an individu	ual or
	·.	20 21 21
VIRG'INIE Name	ALAUERA	I'- 2018 HAR SECRETA ALLAHA
Florida strect address (P.O. Bo	ox <u>NOT</u> acceptable)	HAR -2 PN 12: 02 RETARY OF STATE AHASSEE, FLORINA
I hereby accept the appointment of ovisions of all statutes relating to igations of my position as registe	as registered agent and agree to act in this the proper and complete performance of t	ompany at the s capacity. I my duties, and I
	iress of the principal office of the loffice Address: 1 Office Address: 1 1 1 1 1 1 1 1 1	n the words "Limited Liability Company, "L.L.C.," or "LLC.") dress of the principal office of the Limited Liability Company is: Office Address: Mailing Address:

Fitle: 'AMBR" = Authorized Member 'MGR" = Manager ~	Name and Address:
MGR	Virginia Alauera
1.16 K	
	10861 NE 11th ave
	mani FL 33161
EV: Effective date, if other than the	date of filing: O2/27/18 (OPTIONAL)
ctive date is listed, the date must b f filing.)	e specific and cannot be more than five business days prior to or 90 of not meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the ctive date is listed, the date must be filling.) the date inserted in this block does nent's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 of not meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the ctive date is listed, the date must b filing.) the date inserted in this block does nent's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 of not meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the ctive date is listed, the date must be filling.) the date inserted in this block does nent's effective date on the Department's effective date on the Department's CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is early aware that any	e specific and cannot be more than five business days prior to or 90 of not meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the crive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department's effective date of the Department's effective date of the Depa	not meet the applicable statutory filing requirements, this date will not learn of State's records. In member or an authorized representative of a member. The cuted in accordance with section 605.0203 (1) (b), Florida Statutes. False information submitted in a document to the Department of State.