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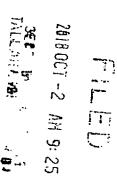
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## **COVER LETTER**

Julie Domey, LLC. SUBJECT:	
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:	
Julie Dorney	
Name of Person	
Lilie Darney, LVC	
242 Woodridge Drive	
Address	
Geneva, FL 32732	
City/State and Zip Code	
domeyjufie@yahoo.com  E-mail address: (to be used for future annual report notification)	
·	
For further information concerning this matter, please call:	
J. Domey 407 312-5244	
Name of Person Area Code Daytime Telephone Number	
Constant is a short for the City in a security	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status   S155.00 Filing Fee & Certificate of Status   Certified Copy (additional copy is enclosed)   Certified Copy (additional copy is	tus &
Mailing Address Street Address	
Mailing Address New Filing Section  Street Address New Filing Section	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Julie Damey, LLC (Must com	ntain the words "Limited Liability C	Company, "L.L.C" or "LLC.")	
RTICLE II - Address: he mailing address and street :	address of the principal office of th	e Limited Liability Company is:	
Princi	pal Office Address:	Madiae Addro	<b>7</b> 7:
242 Woodridge Drive G	iemena, FL 32732	s/a/poa	
	gent, Registered Office, & Registe		
other business entity with an		ed Agent. You must designate an ind	ividual or
ne name and the Florida street	address of the pegistered agent are	:	74 Z
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	Name	Dista.	2
	= 242 Woodridge		
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	F1 1	ox <u>NOT</u> acceptable)  1 3 373 2  1 Zip	## 9: 25

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
11 M GR11	Julie Dorney 242 Wordright Or. Geneva, hu 34732
fective date is listed, the date must be speci of filing.)	f filing:
E.V: Effective date, if other than the date of fective date is listed, the date must be special filling.)  If the date inserted in this block does not memera's effective date on the Department of E.VI: Other provisions, if any.	ific and cannot be more than five business days prior to or 9 set the applicable statutory filing requirements, this date will no
E.V: Effective date, if other than the date of fective date is listed, the date must be special filling.)  If the date inserted in this block does not memera's effective date on the Department of E.VI: Other provisions, if any.  REOURED SIGNATURE:	ific and cannot be more than five business days prior to or 9 tet the applicable statutory filing requirements, this date will no State's records.  State's records.
E.V: Effective date, if other than the date of fective date is listed, the date must be special filling.)  If the date inserted in this block does not memera's effective date on the Department of E.VI: Other provisions, if any.  REOURED SIGNATURE:  Signature of a memory	ific and cannot be more than five business days prior to or 9 set the applicable statutory filing requirements, this date will no

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)