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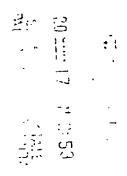
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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TO:	New Filit Division				. 3	3	a 9			
SUBJI	Gayl ECT:	Gayla's Ceramics, LLC Name of Limited Liability Company								
The er	closed Artic	cles of O	rganizatio	on and f	ee(s) are submitted for filing.					
Please	return all co	orrespone	dence cor	ncerning	g this matter to the following:					

Gayla Vieder Name of Person Gayla's Ceramics, LLC Firm/Company 19250 Redberry Ct Address Boca Raton, FL 33498 City/State and Zip Code gaylavieder@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gayla Vieder 502-6308 Daytime Telephone Number Area Code Name of Person

Enclosed is a check for the following amount:

■\$125,00 Filing Fee □\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

□\$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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:						
The name of the Limited Liability	Company is:					
Gayla's Ceramics, LLC		_				
(Must conati	n the words "Limited	Liability Comp	any, "L.L.C.," or "LLC.")			
ARTICLE II - Address:						
The mailing address and street add	ress of the principal	office of the Lin	nited Liability Company is:			
The manning assertion that the east assert	1					
<u>Principal</u>	Office Address:		Mailing Add	ress:		
19250 Redberry Ct			19250 Redberry Ct			
Boca Raton			Boca Raton			
FL 33498			FL 33498			
						
(The Limited Liability Company canother business entity with an act The name and the Florida street ad	ive Florida registrati	on.)	ent. You must designate an in	dividual or		
	Gavla Vieder					
Name						
	19250 Redberry Ct					
	Florida street address (P.O. Box <u>NOT</u> acceptable)					
	Boca Raton	FL	33498			
	City	State	Zip			
lavina haan namad as raaistarad aa			ar than also an area and limite and limit	.:/:***		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I finither agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:						
"AMBR" = Authorized Member							
"MGR" = Manager							
<u>MGR</u>	Gayla Vieder 19250 Redberry Ct						
	Boca Raton, FL 33498						
AMBR	Mark Vieder						
201000	19250 Redberry Ct Boca Raton, FL 33498						
	Boca Raton, FL 33498						
(If an effective date is listed, the date must the date of filing.)	e date of filing:						
the document's effective date on the Depart	not meet the applicable statutory filing requirements, this date will not be listed as						
the document's effective date on the Depart	ment of State's records.						
ARTICLE VI: Other provisions, if any.							
REQUIRED SIGNATURE:\ \(\Lambda \)							
	ale who						
Signature of	a member or an authorized representative of a member.						
I his document is e	This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.						
constitutes a third d							
<u>Mark Vjede</u>	Typed or printed name of signee						
	Types or frames name of signee						

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)