



**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** SOUTH BEACH DESIGN MAGIC, LLC  
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:

ELIZABETH M. SUMMERS  
Name of Person

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SOUTH BEACH DESIGN MAGIC, LLC  
Firm/Company

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PO BOX 170865  
Address

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HIALEAH, FLORIDA 33017  
City/State and Zip Code

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*jazzshizzle@f3hoo.com*  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

ELIZABETH M. SUMMERS 954 393-6614  
at ( )  
Name of Person Area Code Daytime Telephone Number

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**  
**OF**  
**SOUTH BEACH DESIGN MAGIC, L.L.C.**

The undersigned, organization for the purpose of forming an L.L.C. under the Florida Business Limited Liability Act adopts the following according to Florida State Law.

**ARTICLE I: NAME OF THE ORGANIZATION**

The name of the organization is **SOUTH BEACH DESIGN MAGIC, L.L.C** hereafter referred to as the "ORGANIZATION."

**ARTICLE II: PRICIPLE OFFICE AND MAILING ADDRESS**

The address of the principle office and mailing address of the Organization is **5603 Tyler Street Hollywood, Florida 33021**

**ARTICLE III: DURATION OF THE ORGANIZATION**

The period of duration of the Organization shall be Perpetual unless dissolve according to law.

**ARTICLE IV: PURPOSE OF THE ORGANIZATION**

South Beach Design Magic is an interior and Event Design entity, dedicated to provide excellence in client services. In addition, the company creates custom, curated and bespoke design to residential, commercial and institutional communities.

**ARTICLE V: REGISTRATERED AGENT AND OFFICE**

The street address of the organization's initial registered office is **5603 Tyler Street Hollywood, Florida 33021** and the registered agent at that office is **Elizabeth M. Summers**.

**ARTICLE VI MANAGING MEMBERS**

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The organization shall have one (1) Managing Member(s) constituting the initial organization. The number of Managing Member(s) may be increased or decreased from time to time by the bylaws.

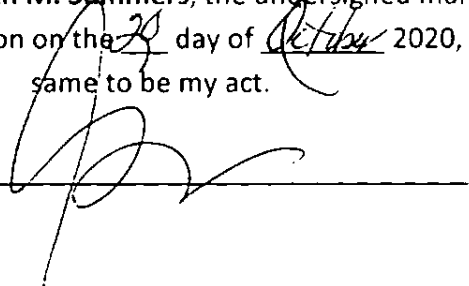
The initial Managing Member of the Organization shall comprise of:

**Elizabeth M. Summers 5603 Tyler Street Hollywood, Florida 33021**

**ARTICLE VII: MANAGING MEMBER**

IN WITNESS WHEREOF, I, **Elizabeth M. Summers**, the undersigned managing member have signed these Articles of Organization on the 20 day of October 2020, and acknowledge the same to be my act.

Signed \_\_\_\_\_



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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE UNITED STATES, NAMING AGENT UPON WHO PROCESS MAY BE SERVED.**

First – That **SOUTH BEACH DESIGN MAGIC, L.L.C.** desiring to organize under the laws of the State of Florida with its principle office, as indicated, in the Articles of Organization at the City of Hollywood, County of Broward, State of Florida, has named **Elizabeth M. Summers 5603 Tyler Street Hollywood, Florida 33021** as the agent of accepting service of process within this state.

-Acceptance of Agent-

**ACKNOWLEDGEMENT**

Having been named as registered agent and to accept service of process for the above stated organization at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further 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.

BY: \_\_\_\_\_

DATE: 10.20.2020

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