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Certified Copies	Certificates of	Status
Special Instructions to Filin	g Officer:	





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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: <u>fashion Sophisticated Boutique LLC.</u> 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:	
Dean Taylor Name of Person	
Fashion Sophisticated Boungie	
3173 NW 39 Court Landerdale Cakes	
Laudadale Pales f 33309 City/State and Zip Code	
Linkus & fashion sophisticated. Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Deon Taylor at (954) HOI-1034 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee □\$155.00 Filing Fee □\$160.00 Filing Fee, Certificate of Status □\$160.00 Filing Fee, Certificate of Status □\$160.00 Filing Fee, Certificate of Status © Certificate Of Stat	ed)

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

Ā	DТ	ICI	L'		Na	me:
А	ĸı	1.	.r.	-	1 2	me.

The name of the Limited Liability Company is:

Fashion So phisticated Bailing LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal	Office Address:		Mailing Address:	
3173 NW 39 Panda dale F1 33309	Court Cakes	3173 Pend FL 333	NW 39 Court erdale Palles	(II VIŠI 22 J
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act	nnot serve as its own Regi	egistered Agent's Si stered Agent. You m	gnature: nust designate an individual or	AN 26
The name and the Florida street ad	dress of the registered ager Deon Taylo			AH 9: 87
	3173 NW 39 Florida street address (P.C. Caude dale			

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 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 as provided for in Chapter 605, F.S..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

FIIC Harrie and odds over the	n authorized to manage and control the Limited Liability Company: Name and Address:
Title:	TRUCKER CO.
"AMBR" = Authorized Member	 1
"MGR" = Manager	Dron Caylor
MGR	3173 NW30 Court Cauderdale Cales F133309
MGR	Simone Laylor 4809 NW SR STICET Tomarac FC 33319
on effective date is listed, the date nus	he date of filing: 1-13-22 (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 days a
TICLE V: Effective date, if other than the an effective date is listed, the date must date of filing.) ote: If the date inserted in this block does document's effective date on the Department.	es not meet the applicable statutory filing requirements, this date will not be list
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