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NAME: BARE BODIES BOUTIQUE LLC

TYPE OF FILING: ARTICLES

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COVER LETTER

TO: N	ew Filing Section ivision of Corp	on orations			
	_	IES BOUTIQUE LLO			
SUBJECT	:	Name of	Limited Liabil	ity Company	··
The enclos	sed Articles of C	organization and fee(s) are submitted	for filing.	
Please retu	ırn all correspor	idence concerning this	s matter to the	following:	
	CARL L KEN	NEDY			
			Name of	Person	
	KENNEDY &	& GOARD LLC			
			Firm/Co	ompany	
	980 N FEDER	RAL HWY SUITE 1	10		
			Add	ress	
	BOCA RATO	ON FL 33432			
		OL COM	City/State a	nd Zip Code	
	CLKTAX@A		used for future	annual report notificati	on)
For further		ncerning this matter, p			
	CARL L KEN		304	552-0206	
	Name		Area Code	Daytime Telephon	e Number
Fuelcoad	is a sheek for th	ne following amount:			
	00 Filing Fee	□\$130.00 Filing F Certificate of Statu	s Certi	55.00 Filing Fee & fied Copy mal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
BARE BODIES BOUTIQUE LLC (Must contain the words "Limited Liability Co	ompany, "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:
980 N FEDERAL HWY SUITE 110	980 N FEDERAL HWY SUITE 110
BOCA RATON FL 33432	BOCA RATON FL 33432
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	Agent. You must designate an intervious of
CARL L KENNEDY Name	8:
	~
980 N FEDERAL HWY STE Florida street address (P.O. Bo	
Florida street address (r.O. Bo	
BOCA RATON FL	33432
City State	e Zip
	he proper and complete performance of my duties, and I

<u>fitle:</u> 'AMBR" = Authorized Mem	<u>Name and Address:</u> ber
MGR" = Manager	
AMBR	ERIKA CALABRESE 980 N FEDERAL HWY STE 110 BOCA RATON FL 33432
AMBR	KYLIE S POSPIECH 980 N FEDERAL HWY STE 110
	BOCA RATON FL 33432
Use attachment if necessary)
EV: Effective date, if other tective date is listed, the date filing.) the date inserted in this bloc	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 k does not meet the applicable statutory filing requirements, this date will not
EV: Effective date, if other to ctive date is listed, the date if filing.) the date inserted in this blochent's effective date on the IEVI: Other provisions, if any NSACT ANY OR ALL LAN	han the date of filing:
EV: Effective date, if other to ctive date is listed, the date if filing.) the date inserted in this blochent's effective date on the left of the provisions, if any SACT ANY OR ALL LAN	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 c k does not meet the applicable statutory filing requirements, this date will not Department of State's records.
EV: Effective date, if other tective date is listed, the date if filing.) the date inserted in this blochent's effective date on the level: Other provisions, if any NSACT ANY OR ALL LAWANIZED IN THE STATE O	han the date of filing:
EV: Effective date, if other to ctive date is listed, the date of filing.) the date inserted in this bloch nent's effective date on the level. Other provisions, if any NSACT ANY OR ALL LAWANIZED IN THE STATE OF REQUIRED SIGNATURE	han the date of filing:
ctive date is listed, the date f filing.) the date inserted in this bloc ment's effective date on the I E VI: Other provisions, if any NSACT ANY OR ALL LAVANIZED IN THE STATE O REQUIRED SIGNATURE Signat This docume I am aware t	han the date of filing:

as

Filing Fees:

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

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)