

L00000008059



H. EDWARD JONES
CERTIFIED PUBLIC ACCOUNTANT

3230 WEST COMMERCIAL BOULEVARD, SUITE 150
FORT LAUDERDALE, FLORIDA 33309

FILED
00 JUL 10 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

W

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Name	<i>Q</i>
Available	<i>17-10</i>
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Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 27, 2000

H. EDWARD JONES
3230 WEST COMMERCIAL BLVD., SUITE 150
FORT LAUDERDALE, FL 33309

SUBJECT: COCOPALM CREATIONS, LC
Ref. Number: W00000016380

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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We have received your document for COCOPALM CREATIONS, LC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 800A00036243

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: COCOPALM CREATIONS, LC

ARTICLE II - Address:

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

1601 SOUTH FLAGLER DRIVE #310-0
WEST PALM BEACH, FL 33401

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

VERDA BRADFORD
Name
1601 SOUTH FLAGLER DRIVE #310-0
Florida street address (P.O. Box <u>NOT</u> acceptable)
WEST PALM BEACH FL 33401
City, State, and Zip

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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 608, F.S..

Verda Bradford

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Verda Bradford
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

VERDA BRADFORD

Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)