## -000001551) City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): OUR LIMOUS INF L.C. (Corporation Name) (Document #) 100004772531--1 -01/14/02--01036--014 (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy ☐ Walk in Pick up time ☐ Photocopy Mail out ☐ Certificate of Status ☐ Will wait **AMENDMENTS** NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director Not for Profit ☐ Change of Registered Agent Limited Liability ☐ Dissolution/Withdrawal Domestication ☐ Merger Other

OTHER FILINGS

Annual Report
Fictitious Name

REGISTRATION/QUALIFICATION

Foreign

Limited Partnership

Reinstatement

Trademark

Other

**Examiner's Initials** 

CR2E031(7/97)

## Your Limousine LLC 850-650-0541

Kevin Carpenter, Your Lineusing, LL.C.

222 Himesa Ave, Destin FL 32541

850-650-0541

DIVISION OF CORPORATIONS



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 15, 2002

KEVIN CARPENTER 622 MIMOSA AVE. DESTIN, FL 32541

SUBJECT: YOUR LIMOUSINE L.L.C.

Ref. Number: W02000001254

We have received your document for YOUR LIMOUSINE L.L.C. 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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 902A00002157

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SECRETARY OF STATE

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ARŢICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CO	MPA	NY	
ARTICLE I - Name: The name of the Limited Liability Company is: Your Limousine. L.C.			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co. 622 Mimosa Ave Destin, F1.32541	mpan	y is:	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatur	re:		
The name and the Florida street address of the registered agent are:			
Kevin S. Carpenter Name	ي		3E
622 Mimosa Ave Florida street address (P.O. Box NOT acceptable)		1 - **	ē
Destin FL 32541  City, State, and Zip			
Having been named as registered agent and to accept service of process for the above statiliability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provistatutes relating to the proper and complete performance of my duties, and I am familiar to accept the obligations of my position as registered agent as provided for in Chapter 608, I Registered Agent's Signature	ent as isions with a F.S.	of all nd	
Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more manager therefore, a manager - managed company.	s and	is,	
(An additional article must be added if an effective date is requested)	02 JAN 2	SECRETA DIVISION OF	_
Signature of a member or an authorized representative of a member.	<del>~~~</del>	837	-

(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.)

KEVIN S CARPENTER
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)

## Your Limousine LLC 850-650-0541

Company Name, Your Lineusine, L.L.C. 22 PM 1022 PM 102

Registered Agent, Kevin Carpenter

622 Mimosa Ave, Destin FL 32541

Kevin & Carpenter

I understand and accept The obligations of this Position.

Your Limousinette.

622 mimosaave Destin Fl. 32541