

# L02000032725

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State

November 15, 2002

TORRY HUNEYCUTT  
2809 REGAL LN  
OVIEDO, FL 32765

SUBJECT: SUSLIME ENTERPRISES L.L.C.  
Ref. Number: W02000032712

We have received your document for SUSLIME ENTERPRISES 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) 245-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 502A00062066

Torry Huneycutt  
2809 Regal Ln  
Oviedo FL 32765

407-230-3422 cell, try 1st  
407-678-0139

FILED  
02 DEC -5 1PM 14:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Sublime Enterprises L.L.C.

## ARTICLE II - Address:

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

2809 Regal Ln  
Oviedo FL 32765

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

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

Torrey Huneycutt  
Name  
2809 Regal Ln  
Florida street address (P.O. Box **NOT** acceptable)  
Oviedo FL 32765  
City, State, and Zip

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.

Torrey Huneycutt  
Registered Agent's Signature

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

Torrey Huneycutt  
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.)

Torrey Huneycutt  
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)

02 DEC 15 PM 4:30  
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