

L030000037921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600022816936

09/15/03--01061--012 **160.00

FILED
2003 OCT -3 AM 10:05
TALLAHASSEE, FLORIDA

W03-26962
J. BRYAN SEP 19 2003

J. BRYAN OCT - 6 2003

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C DESIGNS LLC
(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:

CATHY COOPER
(Name of Person)

C DESIGNS
(Firm/Company)

12012 DUNMORE CT
(Address)

ORLANDO, FL 32821
(City/State and Zip Code)

For further information concerning this matter, please call:

CATHY COOPER at (407) 239-4640
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
2003 OCT -3 AM 10:05
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 19, 2003

CATHY COOPER
C DESIGNS LLC
12012 DUNMORE CT
ORLANDO, FL 32821

SUBJECT: C DESIGNS LLC
Ref. Number: W03000026962

FILED
2003 OCT -3 AM 10:05
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for C DESIGNS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 203A00052039

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

C DESIGNS LLC

ARTICLE II - Address:

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

Principal Office Address:

12012 DUNMORE CT
ORLANDO, FL 32821

Mailing Address:

12012 DUNMORE CT
ORLANDO, FL 32821

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

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

CATHY COOPER
Name
12012 DUNMORE CT
Florida street address (P.O. Box **NOT** acceptable)
ORLANDO, FL 32821
City, State, and Zip

FILED
2003 OCT -3 AM 10:05
CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA

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..

Cathy A Cooper
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

" MGR "

Name and Address:

CATHY COOPER
12012 DUNMORE CT
ORLANDO, FL 32821

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Cathy Cooper

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.)

CATHY COOPER

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)

\$ 160.00

Page 2 of 2

FILED
2009 OCT - 8 AM 10:05
STATE OF FLORIDA
TALLAHASSEE, FLORIDA