

L04000092141

(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



900043267589

12/13/04--01073--005 **160.00

FILED

CL DEC 13 PM 12:36

SEAL OF THE
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

L04 92141
OK

Lydia Sweatt

3505 S. Ocean Drive Unit 814 ~ Hollywood, Florida 33019

December 10, 2004

State of Florida
Registration Section
Division of Corporation
409 E. Gaines
Tallahassee, Florida 32399

Re: Application Packet Including Fees for Articles of Organization For Florida Limited Liability Company

Dear Sir or Madam:

Enclosed please find the appropriate signed application forms as well as the required payment in the form of a check for the registration of the captioned documents.

Thank you for your anticipated cooperation.

Sincerely,


Lydia Sweatt

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 DEC 13 PM 12:36

FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LYDIA SWEATT L.L.C.

(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:

LYDIA SWEATT

(Name of Person)

LYDIA SWEATT L.L.C.

(Firm/Company)

3505 SOUTH OCEAN DRIVE UNIT 814

(Address)

HOLLYWOOD, FLORIDA 33019

(City/State and Zip Code)

For further information concerning this matter, please call:

LYDIA SWEATT

(Name of Person)

at (954)

922-3205

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 DEC 13 PM 12:36

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LYDIA SWEATT L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

3505 SOUTH OCEAN DRIVE UNIT 814
HOLLYWOOD, FLORIDA 33019

Mailing Address:

3505 SOUTH OCEAN DRIVE UNIT 814
HOLLYWOOD, FLORIDA 33019

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

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

LYDIA SWEATT

Name

3505 SOUTH OCEAN DRIVE UNIT 814

Florida street address (P.O. Box **NOT** acceptable)

HOLLYWOOD FL 33019

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..


Registered Agent's Signature

(CONTINUED)

FILED
01 DEC 13 6 11 PM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Name and Address:

MGRM

LYDIA SWEATT

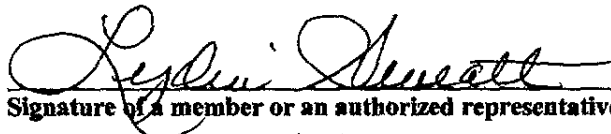
3505 SOUTH OCEAN DRIVE

HOLLYWOOD, FLORIDA 33019

(Use attachment if necessary)

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

REQUIRED SIGNATURE:



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.)

LYDIA SWEATT

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 DEC 13 PM 12:36

FILED

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)