

LD5000038900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

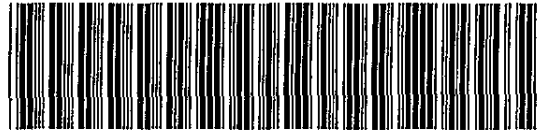
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000047114870

02/25/05--01028--020 **87.50

04/21/05--01014--014 **72.50

FILED
05 FEB 25 AM 10:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

EFFECTIVE DATE
03/06/05

WL 04/105

TRANSMITTAL LETTER

02-03-2005

Department of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

ANGELES DESSERTS INC. LLC

SUBJECT: _____
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

W05-10259

Enclose are an original and two (2) copy of the articles of incorporation and a check for:

\$ 87.50 Filing fee, Certified Copy & Certificate of Status (additional copy required)

FROM: **ANGELES DESSERTS INC. LLC**
 6832 NW 179 Street – Ste 301
 Miami, FL 33015
 Day time Telephone number: 305-401-6350

(Make checks payable to Florida Department of State)

FILED
05 FEB 25 AM 10:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 1, 2005

ANGELES DESSERTS INC. LLC
6832 NW 179 STREET - STE 301
MIAMI, FL 33015

SUBJECT: ANGELES DESSERTS INC. LLC
Ref. Number: W05000010259

We have received your document for ANGELES DESSERTS INC. LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

It is unclear whether you intend to file as a CORPORATION, or as a LIMITED LIABILITY COMPANY. Enclosed are the forms for an LLC, along with instructions including the different filing fees for an LLC.

An entity name cannot include both "INC." and "LLC." If you file as an LLC, please be sure that "INC." does not appear in the name, and if you intend to file as a Corporation, please be sure that "LLC" does not appear in the name.

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: 205A00013674

FILED
05 FEB 25 AM 10:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

SUBJECT: ANGELES DESSERTS LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ivelisse I. Angeles
ANGELES DESSERTS LLC
6832 NW 179 Street, Apt. 301
Miami, FL 33015

For further information concerning this matter, please call:

Ivelisse I. Angeles, at 305-401-6350

Enclosed is a check for the following amount: \$72.50 which is the difference between \$160.00 to filing the LLC and the amount of \$87.50 I have already sent on Feb 19, 2005, such check is still in your offices.

X \$160.00 Filing fee, Certificate of Status & Certified Copy (Additional Copy is enclosed).

FILED
05 FEB 25 AM 10:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF ORGANIZATION
OF
ANGELES DESSERTS LLC**

ARTICLE I

ORGANIZATION NAME
ANGELES DESSERTS LLC

FILED
05 FEB 25 AM 10:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II

PRINCIPAL PLACE OF BUSINESS

The mailing address and street address of the principal office of the limited liability company shall be:

6832 NW 179 Street – Ste. 301
Miami, FL 33015

ARTICLE III

COMPANY REGISTERED AGENT

The name and Florida street address of the limited liability company's registered agent is:

Ivelisse I. Angeles
6832 NW 179 Street – Apt 301
Miami, FL 33015

EFFECTIVE DATE
03/06/05

ARTICLE IV

MANAGING MEMBERS

The name and address of each Manager or Managing members are:

Manager Ivelisse I. Angeles
6832 NW 179 Street – Apt. 301
Miami Fl 33015

Managing Member Ivelisse Pacheco
16101 NW 79 Court
Miami Lakes FL 33016

ARTICLE V

The effective date of organization shall be as of today, March 6th, 2005



Ivelisse I. Angeles
Authorized representative

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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

FILED
05 FEB 25 AM 10:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA