# LD5000100505

(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:			



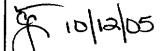
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2005 OCT 10 AMII: 23

Office Use Only

2589 wos-45152



## **COVER LETTER**

TO: Registration Section 2005 OCT 10 AM 11: 23 Division of Corporations TALLAHASSEE FLORIDA SUBJECT: The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Suzee Edwards
(Name of Person) Body Language Studio (Firm/Company) Jupiter, FL 33458 (City/State and Zip Code) For further information concerning this matter, please call: Suzee Edwards (Name of Person) Enclosed is a check for the following amount: \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, \$125.00 Filing Fee \$130.00 Filing Fee & Certified Copy Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

**Mailing Address** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



# FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

2005 OCT 10 AM 11: 23
TALLAHASSEE FLORIDA

September 30, 2005

SUZEE EDWARDS 550 SANCTUARY POINT JUPITER, FL 33458

SUBJECT: BODY LANGUAGE STUDIO, LLC

Ref. Number: W05000045152

We have received your document for BODY LANGUAGE STUDIO, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal office and/or a mailing address in the document.

Please return the original and one copy of 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) 245-6973.

Claretha Golden Document Specialist New Filings Section

Letter Number: 305A00059597

# ARTICLE I - Name: The name of the Limited Liability Company is: Body Language Studio, L.C. (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 10258 Riverside Dr. # Palm Beach Gardens, FL 33410 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

business entity with an active Florida registration.)

Suzee Ed	wards		
Nan	ne		
550 Sanctuaru	Point		
550 Sanctuary Point  Florida street address (P.O. Box NOT acceptable)			
Jupiter	FL	33458	
City, State, and Zip			

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

THE LAL ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: 05 007 10 AM 11: 23 IALLAHASSEE FLORIDA Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_ .(OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

## **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.)

SUZEE EDWARDS Typed or printed name of signee

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)