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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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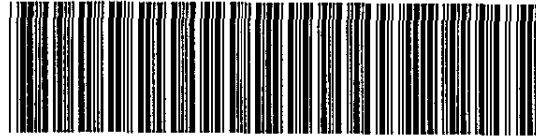
Certificates of Status _____

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FLORIDA

005-44307

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMERIPARTY SALON, 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:

CARMEN FERNANDEZ
(Name of Person)

(Firm/Company)

30W. HILLSBOROUGH AVE.
(Address)

TAMPA, FLORIDA 33604-6929
(City/State and Zip Code)

For further information concerning this matter, please call:

CARMEN FERNANDEZ at (813) 348-0765
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 4, 2005

CARMEN FERDANDEZ
300 W HILLSBOROUGH AVE.
TAMPA, FL 33604-6929

SUBJECT: AMERIPARTY SALON, L.L.C.
Ref. Number: W05000044307

We have received your document for AMERIPARTY SALON, L.L.C. and your check(s) totaling \$130.00. 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) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 805A00058565

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TAMPA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AMERIPARTY SALON, 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:

300 W. HILLSBOROUGH AVE.
TAMPA, FLORIDA 33604-6929

Mailing Address:

300 W. HILLSBOROUGH AVE.
TAMPA, FLORIDA 33604-6929

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

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

CARMEN FERNANDEZ

Name

300 W. HILLSBOROUGH AVE.

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

TAMPA, FLORIDA 33604-6929 FL

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)

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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:

MGR

CARMEN FERNANDEZ

300 W. HILLSBOROUGH AVE.

TAMPA, FLORIDA 33604-6929

MGRM

LUIS MANUEL LUIS

300 W. HILLSBOROUGH AVE.

TAMPA, FLORIDA 33604-6929

(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.)

CARMEN FERNANDEZ

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)

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OF FLORIDA