

L05000120890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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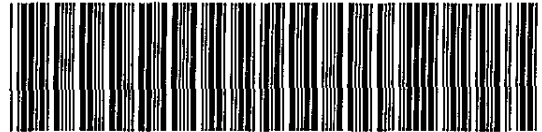
IC

Acknowledgment

DCC

W. P. Verifier

DCC



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02/16/05 --01013--013 **125.00

RECEIVED
FEB 16 2005
15:12 PM
FEB 16 2005

Dec 5. 05

Registration Section
Division of Corp.
Post. Office Box 6327
Tallahassee FL. 32314

561-644-546

Re:

Christina Linton
4847. Palmbrooke Circle
West Palm Beach FL 33417

DEC 11 1905
12:16 PM
Tallahassee, Fla.

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Christina Luton, 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:

Christina Luton
(Name of Person)

Christina Luton, LLC
(Firm/Company)

4847 Palmbrooke Circle
(Address)

West Palm Beach, FL 33417
(City/State and Zip Code)

For further information concerning this matter, please call:

Christina Luton at (561) 644-5462
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Christina Luton, LLC

ARTICLE II - Address:

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

Principal Office Address:

4847 Palmbrooke Circle
West Palm Beach, FL 33417

Mailing Address:

4847 Palmbrooke Circle
West Palm Beach, FL 33417

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

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

Christina Luton

Name

4847 Palmbrooke Circle

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

West Palm Beach, 33417

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)

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

Christina Luton


4847 Palmbrooke Circle

West Palm Beach, FL 33417

(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.)

Christina Luton
Typed or printed name of signer

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)

FILED
JAN 16 2017
CLERK OF COURT
JAN 16 2017
CLERK OF COURT