

L060000088786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

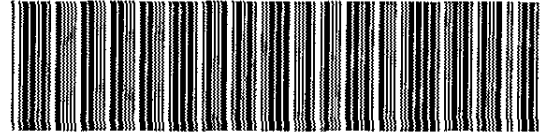
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W006-37144

FEEL

Office Use Only



500078913805

08/21/06--010  
2006 SEP - 8 P 12:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
\*160.00  
**FILED**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 22, 2006

CHAD A. LAZZARI  
9650 WEST LINEBAUGH AVE.  
TAMPA, FL 33626

SUBJECT: 9650, LLC  
Ref. Number: W06000037144

2006 SEP -8 P 12:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

We have received your document for 9650, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

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) 245-6094.

Agnes Lunt  
Document Specialist

Letter Number: 506A00051676

12<sup>th</sup> August, 2006

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

Good Day,

We have recently formed the following:

9650, LLC  
/dba Julianna's Fun Shoppe  
9650 West Linebaugh Avenue  
Tampa, Florida 33626

This is a retail establishment for children's toys and gifts. We have also obtained our Sales & Use Tax certificate and Resale certificate.

Our Fed, Tax ID # is 20-5364114

Please mail all documents and correspondence to the address above. My contact telephone # is 813.431.2592

Thank You,



Chad A. Lazzari  
Manager

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2006 SEP -8 P 12:42

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 9650, LLC /dba Julianna's Fun Shoppe  
(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:

Chad A. Lazzari  
(Name of Person)

9650, LLC /dba Julianna's Fun Shoppe  
(Firm/Company)

9650 West Linebaugh Avenue  
(Address)

Tampa, Florida 33626  
(City/State and Zip Code)

2006 SEP - 8 P 12:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

For further information concerning this matter, please call:

Chad A. Lazzari at ( 813 ) 431-2592  
(Name of Person) (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)

**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

29<sup>th</sup> August, 2006

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

Good Day,

Please find attached a re-filing of our documents pursuant to the recent rejection of the same filing. Our retail store name is "Julianna's Fun Shoppe" and we did not realize it should not be on the form as part of the legal business name.

We were instructed after calling into your office to simply re-file this form, leaving off our DBA name, which we've done and to additionally file a fictitious name registration, which we are also doing.

We've already paid the \$160.00 as you see on the enclosed cancelled check. Please send us our Certificate of Status and Certified Copy consistent with this updated filing.

Kind Regards,



Chad A. Lazzari  
For 9650, LLC  
9650 West Linebaugh Avenue  
Tampa, Florida 33626  
813.431.2592

FILED  
SEP - 12 4:48  
TALLAHASSEE, FLORIDA  
STATE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 9650, 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:

Chad A. Lazzari  
(Name of Person)

9650, LLC  
(Firm/Company)

9650 West Linebaugh Avenue  
(Address)

Tampa, Florida 33626  
(City/State and Zip Code)

For further information concerning this matter, please call:

Chad A. Lazzari at ( 813 ) 431-2592  
(Name of Person) (Area Code & Daytime Telephone Number)

2006 SEP -8 P 12:42  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Registration Section  
Division of Corporations  
P.O. Box 6327  
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Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

9650, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

**ARTICLE II - Address:**

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

**Principal Office Address:**

**Mailing Address:**

9650 West Linebaugh Avenue

9650 West Linebaugh Avenue

Tampa, Florida 33626

Tampa, Florida 33626

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Chad A. Lazzari

Name

9650 West Linebaugh Avenue

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

Tampa, Florida 33626

FL

City, State, and Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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

**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

Chad A. Lazzari

9650 West Linebaugh Avenue

Tampa, Florida 33626

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

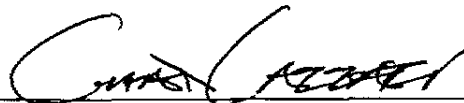
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(Use attachment if necessary)

FILED  
2008 SEP -8 P 12:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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.)

CHAD A. LAZZARI

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)