

LO7000095700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

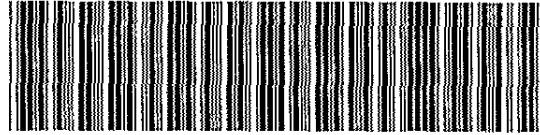
(Document Number)

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TALLAHASSEE
STATE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 29, 2007

CARRINE CHASSAGNÉ
4446 INVERARRY BLVD.
LAUDERHILL, FL 33319

SUBJECT: HYTECK FASHION DESIGNER
Ref. Number: W07000042660

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2007 SEP 18 P 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for HYTECK FASHION DESIGNER and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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: 907A00051969

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: hyteck fashion designer

(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:

carrine chassagne

(Name of Person)

hytech fashion designer

(Firm/Company)

4446 inverarry blvd

(Address)

lauderhill fl 33319

(City/State and Zip Code)

For further information concerning this matter, please call:

carrine chassagne

(Name of Person)

at (

954

662-8002

(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

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TALLAHASSEE FLORIDA
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

hytech fashion designer.,LL.C.

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4446 inverarry blvd

lauderhill fl 33319

lauder hill, FL 33319

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:

CARRINE CHASSAGNE

Name

4446 inverarry blvd

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

LAUDER HILL FL 33319

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.

Carine Chassagne
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

2007 SEP 10
P 3:35
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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:

CARRINE CHASSAGNE

4446 Inverrary Blvd LAUDERHILL FL 33319

THEOTHILE JADOTTE

4446 Inverrary Blvd LAUDERHILL FL 33319

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SEP 18 10 33 AM '07
TALLAHASSEE FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 06/14/2007 (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.)

CARRINE CHASSAGNE (OR) THEOTHILE JADOTTE

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)