

08000041468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

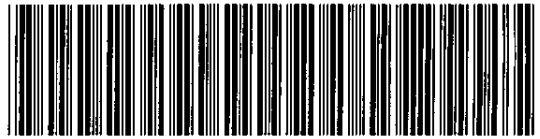
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400125051334

04/24/08--01021--019 **160.00

FILED

08 APR 24 PM 1:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. Thomas APR 25 2008.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A SIGN OF CELEBRATION

(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:

Robert Chewning

(Name of Person)

ASIGNOFCELEBRATION

(Firm/Company)

1320 Edgewater Road

(Address)

Daytona Beach, FL 32114

(City/State and Zip Code)

FILED
08 APR 24 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Robert Chewning

(Name of Person)

at (

321

689-3662

(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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

A Sign Of Celebration LLC.

(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:

1320 Edgewater Road
Daytona Beach, FL 32114

Mailing Address:

P.O. Box 1854
Daytona Beach, FL 32115

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:

Robert Chewning

Name

1320 Edgewater Road

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

Daytona Beach FL, FL 32114

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
08 APR 24 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Robert Chewning

P.O. Box 1854

Daytona Beach, FL 32115

MGR

Stacy Chewning

P.O. Box 1854

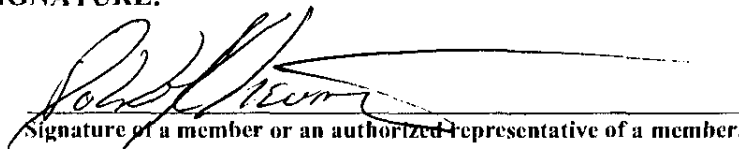
Daytona Beach, FL 32115

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 04/25/2008. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days
to or 90 days after the date of filing.)

FILED
08 APR 24 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.)

Robert Chewning

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)