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**EXAMINER** 

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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 8, 2008

VIVIAN HELLMER AND LYNNETTE PALOMO 9861 W. SAMPLE ROAD #164 CORAL SPRINGS, FL 33065

SUBJECT: A FINE LINE, LLC Ref. Number: W08000023169

We have received your document for A FINE LINE, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P02000127744.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II AY 28 PH 2: 11

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Letter Number: 308A00029523

## COVER LETTER

TO: Registration Section <sup>4</sup> Division of Corporations			
SUBJECT: A FINE LINE, 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:			
Vivian Hellmer and Lynnette Palomo (Name of Person)			
A Fine Line, LLC			
A Fine Line, LLC  (Firm/Company)  9861 W. Sample Road #164  Coral Springs, FL 33065  (City/State and Zip Code)			
Coral Springs, FL 33065			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Vivian Hellmer at (954) 448-0484  (Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$125.00 Filing Fee \$\times 130.00 Filing Fee & Certificate of Status \$\times 25.00 Filing Fee & Certificate of Status \$\times 25.00 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  Clifton Building Tallahassee, FL 32301  Clifton Building Tallahassee, FL 32301			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Line on Line (Must end with the words "Limited Liability)	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9861 W. Sample Road	9861 W. Sample Road #164 Coral Sorings, FL 33065
Coral Springs, FL 33065	Coral Springs, FL 33065
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re  Vivian Hellmer	
Name  9861 W. Samp  Florida street address	.16- 1
Coral Springs City, State, an	ess (P.O. Box <u>NOT</u> acceptable)  P.F.L. 330(6)  d Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate. I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, E.S  SSEE FLUIL STATE  (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: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) .(OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing: (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.

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2