

W080000 77128

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

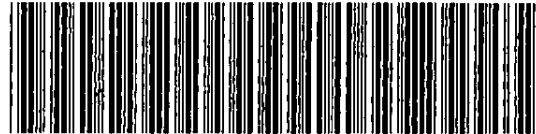
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W08-34681



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07/21/08--01062--005 \*\*150.00

08/12/08--01002--005 \*\*5.00

FILED

08 JUL 21 PM 4:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M. THOMAS

AUG 12 2008

EXAMINER

Mrs. Marsha Thomas  
Regulatory Specialist II  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301  
(850) 245-6051

August 6, 2008

**RE: MiLynn Of South Florida, LLC.**

Dear Mrs. Thomas.

Attached to this letter, you will find the following:

1. Articles Of Organization for MiLynn Of South Florida, LLC. Per our telephone conversation on August 6, 2008, you advised me to send the Articles Of Organization for MiLynn Of South Florida, LLC. You indicated that MiLynn Of South Florida, Inc is currently inactive and thus can't be converted to an LLC. You further advised to send the attached Articles Of Organization for MiLynn Of South Florida, LLC. in order to establish MiLynn Of South Florida, LLC as an LLC. The date of the filing is listed as July 21<sup>st</sup>, 2008 per your instructions.
2. I am also attaching the previous filing where we attempted to change MiLynn Of South Florida from a Corporate Entity to an LLC for your reference purposes.
3. I am attaching a check for \$5.00 so that you can send the certified copy of Registration. I have already send a check for \$150.00. The total costs for the filing and the certified copy is \$155.00. Please mail the certified copy to:

Lynn Collins  
MiLynn Of South Florida, LLC.  
11744 NW 47<sup>th</sup> Drive  
Coral Springs, FL.

If you need any additional information regarding this issue, please contact me at (954) 344 - 9872.

Thank you for your assistance.



Lynn Collins  
Manager  
MiLynn Of South Florida, LLC.

08 JUL 21 PM 4:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: MiLynn Of South Florida, 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:

Lynn Collins

(Name of Person)

MiLynn Of South Florida, LLC.

(Firm/Company)

11744 NW 47th Drive

(Address)

Coral Springs, FL 33076

(City/State and Zip Code)

For further information concerning this matter, please call:

Lynn Collins

(Name of Person)

at ( 954 ) 344-9872

(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 JUL 21 PM 4:19

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 23, 2008

LYNN MARIE COLLINS  
11744 NW 47TH DRIVE  
CORAL SPRINGS, FL 33076

SUBJECT: MILYNN OF SOUTH FLORIDA, LLC  
Ref. Number: W08000034681

We have received your document for MILYNN OF SOUTH FLORIDA, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

The entity must be active on our records.

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) 245-6097.

Marsha Thomas  
Regulatory Specialist II

Letter Number: 808A00042693

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 JUL 21 PM 4:10

FILED

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

MiLynn Of South Florida, 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:

11744 NW 47th Drive  
Coral Springs, FL 33076

### Mailing Address:

11744 NW 47th Drive  
Coral Springs, FL 33076

## 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:

Lynn Collins

Name

11744 NW 47th Drive

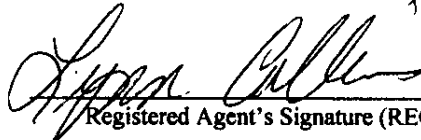
Florida street address (P.O. Box **NOT** acceptable)

Coral Springs, FL 33076

City, State, and Zip

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FILED  
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 \_\_\_\_\_

Lynn Collins

11744 NW 47th Drive

Coral Springs, FL 33076

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: July 21, 2008 (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.)

Lynn Collins

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)