

L09000054661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

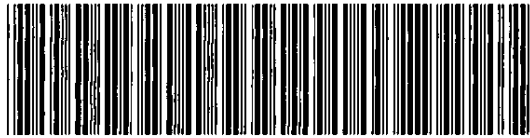
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900156774969

06/04/09--01040--011 **155.00

FILED
2009 JUN -4 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

JUN 5 2009

EXAMINER

William K. Gordon

Attorney at Law

★ P.O. Box 1017, 854B North SR 21, Melrose, FL 32666, (352) 475-1357 Fax (352) 475-2059

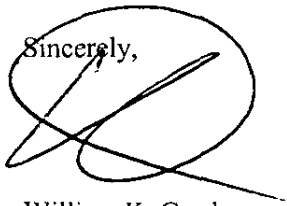
June 2, 2009

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Simply Spatacular, LLC

Enclosed is the Cover Letter, Articles of Organization for a Florida Limited Liability Company and Articles of Dissolution for a Limited Liability Company along with a check in the amount of \$155; \$130 of which is for the Filing Fee and Certificate of Status and \$25 for the Dissolution of a Limited Liability Company. We are dissolving the existing Simply Spatacular, LLC so that the name may be available and acquired by Articles of Organization for Simply Spatacular, managing member – Stacey Johnstone.

Sincerely,

A handwritten signature in black ink, appearing to be 'W. K. Gordon', enclosed within a circular scribble.

William K. Gordon

FILED
2009 JUN -4 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Simply Spatacular, 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:

Stacey Johnstone

Name of Person

Simply Spatacular, LLC

Firm/Company

2775 SW 92nd Terrace

Address

Gainesville, FL 32608

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stacey Johnstone

Name of Person

at (352) 332-1925

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:

Simply Spatacular, 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:

Mailing Address:

2775 SW 92nd Terrace

Gainesville, FL 32608

2775 SW 92nd Terrace

Gainesville, FL 32608

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:

Stacey Johnstone

Name

2775 SW 92nd Terrace

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

Gainesville, FL 32608

FL

City, State, and Zip

FILED
2009 JUN -4 AM 10:32
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)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

FILED

2009 JUN -4 AM 10: 32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

Managing Member

Stacey Johnstone

2775 SW 92nd Terrace

Gainesville, FL 32608

(Use attachment if necessary)

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.)

Stacey Johnstone

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)