

LD9000056315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

LD9000025704

Office Use Only

EFFECTIVE DATE

6/01/09



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06/01/09--01012--017 \*\*130.00

FILED

09 JUN - 1 PM 4:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JUN 10 2009

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LEG-A-SEA SEAFOOD & MEAT MARKET 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:

**STACIE PADILLA**

Name of Person

Firm/Company

**5610 US HWY 19**

Address

**NEW PORT RICHEY FL 34652**

City/State and Zip Code

**stacie@legasea.biz**

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

For further information concerning this matter, please call:

**STACIE PADILLA**

Name of Person

at ( **727** )

**813-728-1790**

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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 2, 2009

STACIE PADILLA  
5610 US HWY 19  
NEW PORT RICHEY, FL 34652

SUBJECT: LEG-A-SEA SEAFOOD & MEAT MARKET LLC  
Ref. Number: W09000025704

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TALLAHASSEE, FLORIDA

We have received your document for LEG-A-SEA SEAFOOD & MEAT MARKET LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on June 1, 2009. Please amend your document accordingly.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 209A00018498

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LEG-A-SEA SEAFOOD & MEAT MARKET 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:**

5610 US HWY 19  
NEW PORT RICHEY FL 34652

**Mailing Address:**

5610 US HWY 19  
NEW PORT RICHEY FL 34652

**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:

STACIE PADILLA

Name

6029 AUGUSTA BLVD

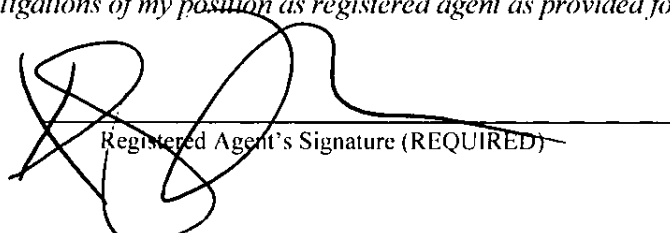
Florida street address (P.O. Box **NOT** acceptable)

HUDSON, FL 34667

FL

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)

EFFECTIVE DATE 6/01/09

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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:**

MGRM

STACIE PADILLA

9029 AUGUSTA BLVD

HUDSON, FL 34667

MGRM

THOMAS FRICK

10403 COPPERWOOD DRIVE

NEW PORT RICHEY FL 34654

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TALLAHASSEE, FLORIDA

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 8/6/09 8-1-2009 (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.)

Stacie Padilla

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)**