

L0900007083a

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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09 JUL 23 AM 6:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S. HAWKES
JUL 21 2009
EXAMINER

S. HAWKES
~~JUL 21 2009~~
EXAMINER

Handwritten signature/initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 2, 2009

DONALD G RUTH
45 SAILFISH DRIVE
ST AUGSTINE, FL 32080

SUBJECT: CELEBRATIONS UNLIMITED LLC
Ref. Number: W09000030703

We have received your document for CELEBRATIONS UNLIMITED 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):

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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 709A00022845

July 14, 2009

Florida Dept of State
Division of Corporations

Attn: Suzanne Hawkes
850-245-6030

Re: Renaming of "Celebrations Unlimited"

A pages

Suzanne:

Attached are the articles for our LLC with the name revision that we discussed yesterday.

I have also included your cover page letter informing us of our need to modify/change the name of our LLC.

Please let me know if there are any further problems. Also, again as discussed please fax over a copy of the certificate with our new name on it so that I can then proceed to make this change with other state divisions and the federal government.

Thank you for your help,
Kelly Jordaan
Celebrations Unlimited V, LLC
904-710-8180

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CELEBRATIONS UNLIMITED 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:

DONALD G RUTH

Name of Person

Firm/Company

45 SAILFISH DRIVE

Address

ST. AUGUSTINE, FL 32080

City/State and Zip Code

info@celebrationsunlimitedfl.com

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

For further information concerning this matter, please call:

DONALD G. RUTH

Name of Person

at (**904**)

461-5655

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

904-710-8180
322-7369 FAX

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09 JUL 23 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CELEBRATIONS UNLIMITED V.L.L.C.

(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:

45 SAIL FISH DRIVE
ST AUGUSTINE, FL 32080

SAME

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:

DONALD G RUTH

Name

45 SAILFISH DRIVE

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

St. Augustine, FL 32080 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..

Donald G. Ruth

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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

DONALD G RUTH
45 SAILFISH DRIVE
ST AUGUSTINE, FL 32080

MGRM

GINA L RUTH
45 SAILFISH DRIVE
ST AUGUSTINE, FL 32080

MGRM

KELLY L JORDAAN
255 Old Town Center Circle #9304
ST AUSUTINE, FL 32084

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: June 25 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.)

DONALD G. RUTH
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)

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09 JUL 23 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA