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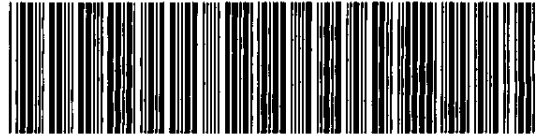
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

N. O'Connell

DEC 21 2003



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 7, 2009

TRACY A. MITCHELL
PO BOX 880835
BOCA RATON, FL 33488-0835

SUBJECT: SWAN STYLE, LLC
Ref. Number: W09000053132

We have received your document for SWAN STYLE, 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):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 609A00037285

**TO: Registration Section
Division of Corporations**

SUBJECT: SWAN Style, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tracy A. Mitchell
SWAN Style, LLC
P.O. Box 880835
Boca Raton, FL 33488-0835

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

swanstylellc@gmail.com

For further information concerning this matter, please call:

Awet Gebrehiiwet-Wilder
(954)401-3293

or Tracy A. Mitchell
(954) 732-7670

Enclosed is a check for the following amount:

* \$160.00 Filing Fee, Certificate of Status & Certified Copy

**ARTICLES OF ORGANIZATION
FOR
SWAN Style, LLC**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I – Name. The name of this Limited Liability Company is “SWAN Style, LLC” (“Company”).

ARTICLE II- Duration. The Company’s period of duration shall be perpetual from the date of the filing of these Articles of Organization with the Florida Secretary of State, unless sooner dissolved by the members or as provided by Statute.

ARTICLE III- Purpose. The Company is organized to conduct all lawful purposes allowed under the Florida Limited Liability Company Act.

ARTICLE IV – Addresses.

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

5761 Riverside Dr. #303
Coral Springs, FL 33067

Mailing Address:

P.O. Box 880835
Boca Raton, FL 33488-0835

ARTICLE V- Registered Agent, Registered Office, & Registered Agent’s Signature.

The name and address of the registered agent, whose “Consent to Appointment as Registered Agent” is included herein below, is:

Tracy A. Mitchell
5761 Riverside Drive
Unit 303
Coral Springs, FL 33067

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

Page 1 of 2

ARTICLE VI- Capitalization.

The capital contribution of its members has a value of \$5,000. Additional capital contribution may be contributed only upon the unanimous vote of the members, and no additional capital contribution will ever be required at the request of non-member third parties.

ARTICLE VII-Admission of Additional Members.

Additional members may be admitted to the company only upon such terms as are unanimously agreed to by all members pursuant to the applicable provisions of the operating agreement.

ARTICLE VIII-Continuity. The members have the right to continue the business of the Company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or occurrence or any other event which terminates the continued membership of a member in the Company. Continuation may occur only pursuant to the terms of the Operating Agreement and with the unanimous vote of the members.

ARTICLE IX-Managing Members.

The name and address of the Managing Members are as follows:

Tracy A. Mitchell, MGRM
P.O. Box 880 835
Boca Raton, FL 33488 - 0835

Awet Gebrehiiwet-Wilder, MGRM
P.O. Box 880 835
Boca Raton, FL 33488 - 0835

REQUIRED SIGNATURES:

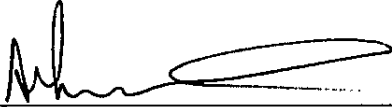


Tracy A. Mitchell, as MGRM

(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.)

Tracy A. Mitchell

Typed or printed name of signee



Awet Gebrehiiwet-Wilder, as MGRM

(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.)

AWET GEBREHIWET-WILDER

Typed or printed name of signee

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CLERK OF COURT
TALLAHASSEE, FLORIDA