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DIVISION OF CASE PROBLEM



S. HAWKES FEB 1 8 2010

EXAMINER

COVER LETTER

	ion Section of Corporations		
subject: <u>H</u> e	athery Floral'S Name of Limited L	Liability Company	
The enclosed Artic	les of Organization and fee(s) are sub-	mitted for filing.	
Please return all co	rrespondence concerning this matter to	o the following:	
Heat		me of Person	
Hea	therly Floral's	LLC.	
211	Dakland Aug	٥.	
T 11	(1 2020)	Address	
10110	City/Sti	ate and Zip Code	
	E-mail address: (to be used for fu	uture annual report notification)	· · · · · · · · · · · · · · · · · · ·
For further informa	tion concerning this matter, please cal	II:	
Heather	ame of Person at	(450) 321 - Area Code & Daytime Tel	8738 ephone Number
Enclosed is a chec	ck for the following amount:		
]\$125.00 Filing F	ee \$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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	as

ARTICLE II - Name: The name of the Limited Liability Company is: Heather Foral S (Must end with the/words "Limited Liability Company," "L.L.C.," or "L.L.C.," or "L.L.C.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Mailing Address: 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: Heather V Mail S Name

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)

Page 1 of 2 (CONTINUED)

MGD" - Managar	Name and Address:
'MGR" = Manager 'MGRM" = Managing Membe	
Mgron.	Heathery Kell'S 211 Dakland Ave Talla. FL 3230
Use attachment if necessary)	
EV: Effective date, if other the ctive date is listed, the date is lays after the date of filing.)	an the date of filing: (OPTION nust be specific and cannot be more than five business d
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dective date is listed, the date in lays after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume	member or an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution nt constitutes an affirmation under the penalties of perjury ated herein are true.)
REQUIRED SIGNATURE: Signature of a (In accordance of this docume that the facts st.	member or an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution not constitutes an affirmation under the penalties of perjury