# 110000019199

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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10100000000079

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10 MAR -3 PM 1:22

D. BRUCE

MAR 04 2010

**EXAMINER** 



### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 17, 2010

CASSIA DAWSON 8430 MONTRAVAIL CIRCLE, #316 TAMPA, FL 33637

SUBJECT: OVATIONS, LLC Ref. Number: W10000008079

10 MAR -3 PM 1:22

We have received your document for OVATIONS, 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):

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. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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: 910A00003982

# **COVER LETTER**

TO:	Registration S Division of Co			
SURI	ест: <u></u>	ations L	LC.	
3013	Ecr. <u>C7 v</u>	ations, L Name of Limit	ed Liability Company	
The er	closed Articles of	f Organization and fee(s) are	submitted for filing.	
Please	return all corresp	ondence concerning this mat	ter to the following:	
	Cass	sia Dawso	Name of Person	من آخ
			Name of Person	
				AAR -
			Firm/Company	SSE S
	8430	Montravai	1 Circle, #310	. =
			Address	22 RID/
	Tamo	, r, 2	> / > ¬	22
	Tamb	9 + P = 3	y/State and Zin Code	
	Cour	Eray 200 C	1 . C C2	
		E-mail address: (to be used to	y/State and Zip Code  Oli Com  for future annual report notification)	
For fu	rther information	concerning this matter, please	e call:	
	) _ <u>0 55                                  </u>	Dawson of Person	at ( 941 ) 704-( Area Code & Daytime Telep	6696 hone Number
Enclo	sed is a check fo	r the following amount:		
<b>□</b> \$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Ci Tallahassee, FL 32301	rcle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
8430 Montravail Circle #316	8430 Montravail Circle
#316 Tampa, FL. 33637	Tampa, FL, 33637
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	tegistered Agent. You must designate an individual or another
The name and the Florida street address of t	he registered agent are:
Cassia Di	awson Representation of the second se
8430 Montrava, Florida stree	t address (P.O. Box NOT acceptable)
Tampa, City	FL 33 63 7 7, State, and Zip
Having been named as registered agent and	to accept service of process for the above stated limited

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managin	Name and Address:  Member	
MGRM	Christopher Scott Caldwell 8430 montravail Cir.#316 Tampa, FL. 33637	
MGRM	Cassia Dawson 8430 Montravail Cir. #316 Tampa, FL. 33(037	
(Use attachment if ne	• ,	
	f other than the date of filing: (OPTIONAL) he date must be specific and cannot be more than five business days pric filing.)	or
REQUIRED SIGNA	TURE:  AND THE SECOND STATE OF A MEMber. ASSET 13	Π
(In a of th	coordance with section 608.408(3), Florida Statutes, the execution s document constitutes an affirmation under the penalties of perjury he facts stated herein are true.)  Christophic Caldwell Typed or printed name of signee	コフ

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)