## 1100000033855

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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Office Use Only



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**EXAMINER** 

SECRETARY OF STATE



February 19, 2010

STACEY COPELAND 690 MCMILLAN RD CHATTAHOOCHEE, FL 32324

SUBJECT: STARR ENTERPRISES, LLC

Ref. Number: W1000008596

We have received your document for STARR ENTERPRISES, 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. 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.

The document number of the name conflict is L06000042292.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 510A00004200

## COVER LETTER

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|--------------------|---|
| SUBJECT:           | STARR ENTERPRISES, LLC  |
|                    | Name of Limited Liability Company   |
|                    |   |
| The enclosed Art   | icles of Organization and fee(s) are submitted for filing.  |
| Dia                | and the second s  |
| ricase return an C | correspondence concerning this matter to the following:   |
|                    | STACEY COPELAND   |
|                    | Name of Person  |
|                    |   |
|                    | F: /O   |
|                    | Firn/Company  |
|                    | 690 MCMILLAN RD   |
|                    | Address   |
|                    |   |
| *****              | CHATTAHOOCHEE FL., 32324 City/State and Zip Code  |
|                    |   |
| -                  | E-mail address: (to be used for future annual report notification)  |
| E 6 4 1 6          |   |
| For further inform | nation concerning this matter, please call:   |
| ST/                | nation concerning this matter, please call:  ACEY COPELAND  at ( 850 ) 694-9982   |
| 017                | Name of Person Area Code & Daytime Telephone Number   |
|                    |   |
| Enclosed is a ch   | Name of Person  Area Code & Daytime Telephone Number  CODE  Area Code & Daytime Telephone Number  CODE  |
| 7\$125.00 Filing   | Fee \$\sqrt{\$130.00}\$ Filing Fee & \$\sqrt{\$155.00}\$ Filing Fee & \$\sqrt{\$160.00}\$ Filing Fee,   |
|                    | Certificate of Status Certified Copy Certificate of Status &  |
|                    | (additional copy is enclosed) Certified Copy  |
|                    | (additional copy is enclosed  |
|                    | Mailing Address Street/Courier Address  |
|                    | Registration Section Registration Section   |
|                    | Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building   |
|                    | Tallahassee, FL 32314 514 1918 2001 Executive Center Circle   |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| AK. | HCL  | Ľ I  | - N | ame  |
|-----|------|------|-----|------|
| The | name | of 1 | the | Limi |

The name of the Limited Liability Company is:

| STARR ENTERPRISES OF NORTH FLA, 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 pri  | incipal office of the Limited Liability Company is: |  |  |  |  |
| Principal Office Address:  | Mailing Address:                                    |  |  |  |  |
| 690 MCMILLAN RD<br>CHATTAHOOCHEE FL 32324  | 690 MCMILLAN RD<br>CHATTAHOOCHEE FL 32324           |  |  |  |  |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register     |   |  |  |  |  |

The name and the Florida street address of the registered agent are:

STACEY COPELAND

Name

690 MCMILLAN RD

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

CHATTAHOOCHEE FL 323

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)

Page 1 of 2
(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR STACEY COPELAND 690 MCMILLAN RD CHATTAHOOCHEE FL. 32324 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_02/15/2010 \_\_\_\_\_. (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 of 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.) STACEY COPELAND 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)

Page 2 of 2

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