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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

W1-11601

J. BRYAN

MAR 2 4 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 8, 2010

TAKESHIA K LONG INFUSION, LLC 4561 85TH TERRACE PINELLAS PARK, FL 33781

SUBJECT: INFUSION, LLC Ref. Number: W10000011601



We have received your document for INFUSION, 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.

The document number of the name conflict is #L02000010164, INFUSION, LLC.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 210A00005669

Department of Corporations:

Enclosed is a copy of corrected paperwork for filing. I have elected to use as my corporation name **Infusion Mass Media**, **LLC** since the previously chosen name is that of an already established entity. I have also enclosed a copy of the paid check (paid on 3/8/2010) as well as the page from your website that shows the "W Number" assigned to my initial filing. Thank you so much for taking the time to adhere to this request. I sincerely hope to hear from you in the future.

Signed,

Takeshia K Long

SECRETARY OF STATE

COVER LETTER

TO: Registration Division of C	Section Corporations				
SUBJECT:	Infusio	n Mass Media	a, LLC		
	Name of Limit	ted Liability Com	ipany		
The enclosed Articles	of Organization and fee(s) are	submitted for fil	ing.		
Please return all corres	spondence concerning this mat	ter to the followi	ng:		
	Та	keshia K Long	H		
-		Name of Person			
	inf	usion Mass Me	edia, LLC		THE A
.	•	Firm/Company			杂 另一
	ASA	31 85th Terrac	Δ.		A S S S S S S S S S S S S S S S S S S S
<u> </u>	700	Address	<u> </u>		而是
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		as Park, FL 33			955 T3
	Cit	y/State and Zip Co	de		5
		ings2@gmail.			
	E-mail address: (to be used	for future annual re	port notificatio	on)	
For further information	n concerning this matter, please	e call:			
Khaliua D	Muhammad	404	400.000	on	
	Muhammad e of Person	at (404 Area Co	409-088 de & Daytime		hone Number
		7.000 00	a a bayanı	. o.op	14511041
Enclosed is a check i	for the following amount:		•		
□\$125.00 Filing Fee	_	□\$155.00 Fil	ing Fee &		\$160.00 Filing Fee,
	Certificate of Status	Certified C		_	Certificate of Status &
		(additional co	py is enclosed))	Certified Copy (additional copy is enclosed)
	Mailing Address		Courier Addr	css	
	Registration Section Division of Corporations		ntion Section n of Corporat	ions	
	P.O. Box 6327	Clifton	Building		. 1
	Tallahassee, FL 32314		xecutive Cent ssee, FL 3230		rcie

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Infusion Mass Media, 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 principal office of the Limited Liability Company is: **Principal Office Address:** Mailing Address: 4561 85th Terrace 4561 85th Terrace Pinellas Park, FL 33781 Pinellas Park, FL 33781 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:

Mary H Mitchell
Name

11105 Hoffner Edge Drive
Florida street address (P.O. Box NOT acceptable)
Riverview, FL 33579

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)

(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" = Managing Member	Name and Address:	TALLES OF THE
MGR	Takeshia K Long	超23
**************************************	4561 85th Terrace	
	Pinellas Park, FL. 33781	SSEE S
MGRM	Lodon C. Loo	SEE. FLOR
MOIAN	Ladara S. Lee	
	2017-48th Place West	-
	Birmingham, Al 35208	
MGRM	Mary H Mitchell	
	11105 Hoffner Edge Drive	
	Riverview, Fl 33579	
		
MGRM	Khaliyq Muhammad	<u>.</u>
	1915 Race Avenue First Floor	
	Chicago, IL 60622	
(Use attachment if necessary) CLE V: Effective date, if other than the effective date is listed, the date must 0 days after the date of filing.)	he date of filing: be specific and cannot be more than five be	(OPTIONAL) usiness days prior
REQUIRED SIGNATURE:		
Jake	ho Yo Long) befor an authorized representative of a member.	
Signature of a memi	ber or an authorized represonative of a member. section 608.408(3), Florida Statutes, the execution astitutes an affirmation under the penalties of perjury herein are true.)	
Signature of a memi (In accordance with a of this document con	section 608.408(3), Florida Statutes, the execution istitutes an affirmation under the penalties of perjury	

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)